| Fill in this information to identify your case: | | |
|---|---|--------------------------------------|
| United States Bankruptcy Court for the : | | |
| NORTHERN District ofILLINOIS(State) | | |
| Case Number (If known): | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | ☐ Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case-and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Identify Yourself | | |
|----|---|----------------------------|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| | Write the name that is on your government-issued picture identification (for example, | Emma First name Jean | First name |
| | your driver's license or passport). | Middle name | Middle name |
| | Bring your picture | Dunn | |
| | identification to your meeting with the trustee. | Last name | Last name |
| | | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. | All other names you | | |
| | have used in the last 8 years | First name | First name |
| | Include your married or maiden names. | Middle name | Middle name |
| | | Last name | Last name |
| | | First name | First name |
| | | Middle name | Middle name |
| | | Last name | Last name |
| 3. | Only the last 4 digits of your Social Security | XXX - XX - <u>8575</u> | XXX - XX |
| | number or federal Individual Taxpayer Identification number | OR | OR |
| | identification number | 9xx - xx | 9 xx - xx |

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Document Emma Jean Debtor 1 Case Number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|--|---|---|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | Business name Business name EIN EIN | I have not used any business names or EINs. Business name Business name EIN EIN |
| 5. | Where you live | 5019 W Maypole Ave Number Street | If Debtor 2 lives at a different address: Number Street |
| | | Chicago IL 60644 City State ZIP Code COOK County | City State ZIP Code County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from the one above, fill it in here. Note that the court will send any notices this mailing address. |
| | | P.O. Box City State ZIP Code | Number Street P.O. Box City State ZIP Code |
| | | | |
| 6. | Why you are choosing this district to file for bankruptcy. | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | have another reason. Explain. (See 28 U.S.C. § 1408 | I have another reason. Explain. (See 28 U.S.C. § 1408 |

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Document Emma Jean Debtor 1 Case Number (if known)

| Pa | Tell the Court About You | Bankruptcy Case | | | | |
|-----|---|--|--|--|--|--|
| 7. | The chapter of the Bankruptcy Code you are choosing to file under | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7 Chapter 11 Chapter 12 Chapter 13 | | | | |
| 8. | How you will pay the fee | I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. | | | | |
| 9. | Have you filed for bankruptcy within the last 8 years? | ■ No Yes. District None | | | | |
| 10. | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business parter, or by affiliate? | ■ No Yes. Debtor Relationship to you District When Case Number, if known MM / DD / YYYY Debtor Relationship to you District When Case Number, if known MM / DD / YYYY | | | | |
| 11. | Do you rent your residence? | No. Go to line 12 Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? No. Go to line 12. Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it with this bankruptcy petition. | | | | |

| Debto | Case 16-3209 | 3 Doc 1 | 1 Filed 10/07 Docume | | red 10/07/16 11:08:05 4 of 56 Case Number (if known) | Desc Main | |
|-------|---|-------------------------|---|--------------------------------------|---|------------------|---|
| Doblo | First Name | Middle Name | Last Name | | case Hamber (in Mount) | | |
| Par | t 3: Report About Any Busine | esses You Own a | as a Sole Proprietor | | | | |
| 12. | Are you a sole proprietor of any full- or part-time business? | | Go to Part 4. Name and location of b | siness | | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnerhsip, or | | Name of business, if any | | | | |
| | LLC. If you have more than one sole proprietorship, use a separate sheed and attach it to this petition. | | Number Street | | | | |
| | to the petitori. | - | | | | Zip Code | |
| | | | Check the appropriate I | ox to describe vo | | | |
| | | | | - | 11 U.S.C. § 101(27A)) | | |
| | | | ☐ Single Asset Real | Estate (as defined | d in 11 U.S.C. § 101(51B)) | | |
| | | | ☐ Stockbroker (as d | efined in 11 U.S.C | i. § 101(53A)) | | |
| | | | ☐ Commodity Broke | (as defined in 11 | U.S.C. § 101(6)) | | |
| | | | ☐ None of the above | | | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business | appropriate balance she | deadlines. If you indicate | e that you are a sons, cash-flow sta | ow whether you are a small business demail business debtor, you must attach atement, and federal income tax return S.C. § 1116(1)(B). | your most recent | |
| | debtor? For a definition of small | No. I a | ım not filing under Chap | er 11. | | | |
| | business debtor, see 11 U.S.C. § 101(51D). | | nm filing under Chapter e Bankruptcy Code. | 1, but I am NOT a | a small business debtor according to the | ne definition in | |
| | | | am filing under Chapter ankruptcy Code. | I1 and I am a sma | all business debtor according to the de | finition in the | |
| Par | Report if You Own or Ha | ve Any Hazardoi | us Property or Any Prope | rty That Needs Im | mediate Attention | | _ |
| 14. | Do you own or have any property that poses or is alleged to pose a threat of imminent and indentifiable hazard to | No. | /hat is the hazard? | | | | |
| | public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | lf | immediate attention is i | eeded, why is it n | needed? | | |
| | | W | Vhere is the property? _ | Number St | reet | | |

City

State

ZIP Code

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Debtor 1

Emma Jean Document

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Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any,

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing abou |
|--|
| credit counseling because of: |

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any,

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. approved You must file a certificate from the agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to rece | ive a briefing about |
|---------------------------|----------------------|
| credit counseling because | se of: |

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

> to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Document Emma Jean Debtor 1 Case Number (if known)

| art | Answer These Questions | for Reporting Purposes | | | | | |
|-----|--|--|---|--|--|--|--|
| | What kind of debts do you have? | 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." | | | | | |
| | | No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. | | | | | |
| | | | | | | | |
| | | No. Go to line 16c. Yes. Go to line 17. | | | | | |
| | | 16c. State the type of debts you o | we that are not consumer debts or business d | ebts. | | | |
| | Are you filing under Chapter 7? | ───────────────────────────────────── | napter 7. Go to line 18. | | | | |
| | Do you estimate that after | | er 7. Do you estimate that after any exempt possers are paid that funds will be available to distrib | | | | |
| | any exempt property is | No. | · | | | | |
| | excluded and administrative expenses | <u>=</u> | | | | | |
| ; | are paid that funds will be available for distribution | ∐Yes. | | | | | |
| | to unsecured creditors? | - 4.40 | П4 000 5 000 | Погоод го ооо | | | |
| | How many creditors do you estimate that you | ■ 1-49 □ 50-99 | ☐ 1,000-5,000 ☐ 5,001-10,000 | ☐ 25,001-50,000 ☐ 50,001-100,000 | | | |
| | owe? | ☐ 100-199 | ☐ 10,001-25,000 | ☐ More than 100,000 | | | |
| | | 200-999 | | | | | |
| ı | How much do you | \$0-\$50,000 | \$1,000,001-\$10 million | □\$500,000,001-\$1 billion | | | |
| | estimate your assets to | \$50,001-\$100,000 | \$10,000,001-\$50 million | □\$1,000,000,001-\$10 billion | | | |
| | be worth? | \$100,001-\$500,000 | □ \$50,000,001-\$100 million | \$10,000,000,001-\$50 billion | | | |
| | | \$500,001-\$1 million | \$100,000,001-\$500 million | More than \$50 billion | | | |
| | How much do you | \$0-\$50,000 \$50,001,6100,000 | \$1,000,001-\$10 million | \$500,000,001-\$1 billion | | | |
| | estimate your liabilities to be? | ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 | \$10,000,001-\$50 million \$50,000,001-\$100 million | □\$1,000,000,001-\$10 billion □\$10,000,000,001-\$50 billion | | | |
| | | □ \$500,001-\$300,000 | \$100,000,001-\$100 million | ☐ More than \$50 billion | | | |
| ırt | 7: Sign Below | | _ , , , . | | | | |
| ۲V | ou | I have examined this petition, and correct. | I declare under penalty of perjury that the info | rmation provided is true and | | | |
| • | | | | | | | |
| | | · · · · · · · · · · · · · · · · · · · | ter 7, I am aware that I may proceed, if eligible nderstand the relief available under each chap | | | | |
| | | , . | did not pay or agree to pay someone who is nd read the notice required by 11 U.S.C. § 342(| , | | | |
| | | I request relief in accordance with | the chapter of title 11, United States Code, spo | ecified in this petition. | | | |
| | | - | nent, concealing property, or obtaining money in fines up to \$250,000, or imprisonment for up to 3571. | | | | |
| | | /s/ Emma Jean Dunn Signature of Debtor 1 | X | ture of Debtor 2 | | | |
| | | orginature of Debtor 1 | Signal | | | | |
| | | Executed on10/07/2016 | | ted on | | | |
| | | MM / DD / | | MM / DD / YYYY | | | |

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| Debtor 1 | Emma | Jean | Document Dunn | Page 7 of 56 Case Number (if known) | | | |
|----------|--|---|--|--|------------------------|--|--|
| | First Name | Middle Name | Last Name | | | | |
| _ | | I, the attorney for the | e debtor(s) named in this | petition, declare that I have informed the debtor(s) about eligibilit | , | | |
| • | attorney, if you are ited by one | each chapter for wh 11 U.S.C. § 342(b) a | ich the person is eligible. and, in a case in which § 7 | 11, United States Code, and have explained the relief available I also certify that I have delivered to the debtor(s) the notice req (07(b)(4)(D) applies, certify that I have no knowledge after an inc | uired by | | |
| represer | e not represented | each chapter for wh 11 U.S.C. § 342(b) a | ich the person is eligible. | I also certify that I have delivered to the debtor(s) the notice req 07(b)(4)(D) applies, certify that I have no knowledge after an inc | uired by | | |
| represen | e not represented orney, you do not | each chapter for wh 11 U.S.C. § 342(b) a | ich the person is eligible. and, in a case in which § 7 | I also certify that I have delivered to the debtor(s) the notice req 07(b)(4)(D) applies, certify that I have no knowledge after an inc | uired by | | |
| represen | e not represented | each chapter for wh 11 U.S.C. § 342(b) a | ich the person is eligible. and, in a case in which § e schedules filed with the | I also certify that I have delivered to the debtor(s) the notice req 07(b)(4)(D) applies, certify that I have no knowledge after an inc | uired by quiry that | | |

IL

State

IL

State

Email address

60603

ZIP Code

ndil@geracilaw.com

Printed name

Firm name

Number Street

Chicago

6309470

Bar number

Geraci Law L.L.C.

55 E. Monroe St., #3400

Contact Phone __312-332-1800

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| Fill in this in | nformation to iden | tify your case: | | |
|---------------------------|----------------------|-------------------------------------|-----------------|--|
| Debtor 1 | Emma | Jean | Dunn | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States | Bankruptcy Court for | r the : <u>NORTHERN</u> District of | LLINOIS (State) | |
| Case Number (If known) | r | | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Summarize Your Assets | |
|--|--------------------------------------|
| | Your assets Value of what you own |
| Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | <u> </u> |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$ 975 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$ 975 |
| | |
| Part 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$0 |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$0 \$23,661 |
| | |
| Part 3: Summarize Your Liabilities | |
| 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$1,081.00 |
| Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$1,075.00 |

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Debtor 1 Emma Jean Case Number (if known) _ First Name Middle Name Last Name **EntriesDescription** <u>AssetsAmount</u> **LiabilitiesAmount Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapter 7, 11 or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$ 0.00 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 of Schedule E/F, copy the following: \$ 0.00 9a. Domestic support obligations (Copy line 6a.) \$ 0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) $_{0.00}$ 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) 9d. Student loans. (Copy line 6f.) \$ 0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as \$ 0.00 priority claims. (Copy line 6g.) \$ 0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) \$ 0.00 9g. Total. Add lines 9a through 9f.

| | Caso 1 | 6 22002 Doc 1 | Filad 10/07/16 | Entered 10/07/16 11:08:0 |)5 De: | sc Main | |
|---|---|---|---|--------------------------|---------|---|---------|
| Fill in this in | formation to ide | ntify your case and this filing | | 0 of 56 | | | |
| Debtor 1 | Emma | Jean | Dunn | | | | |
| 5 | First Name | Middle Name | Last Name | | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States | Bankruptcy Court f | for the : <u>NORTHERN</u> District | of <u>ILLINOIS</u> | | | | |
| Case Number | | | (State) | | [| Check if this is | s an |
| (If known) | 0 mm 100 A | /D | | | | amended filing | j |
| | orm 106A e A/B: Pr | | | | | | |
| n each category ategory where esponsible for ages, write you | y, separately list you think it fits supplying corre ur name and cas Describe Each Re | t and describe items. List an best. Be as complete and ac | curate as possible. If two me is needed, attach a separa r every question. er Real Esate You Own or Ha | | equally | | 12/15 |
| No. | Describe | 3 | 3 , | , , , , , , , , , , | | | |
| | lar value of the p | portion you own for all of you | | | | | |
| you have at | tached for Part | 1. Write that number here | | > | | | \$0.00 |
| Part 2: | Describe Your Ve | hicles | | | | | |
| No. Yes. Watercraft Examples: No. Yes. Add the doll | Describe The property of | res. If you lease a vehicle, also s, sport utility vehicles, moto homes, ATVs and other recroors, personal watercraft, fishing vertically on the properties of the properties | eational vehicles, other veh | accessories | | | \$ 0.00 |
| | | | | | | | |
| Do you own or | | or equitable interest in any c | f the following items? | | | Current value of portion you own Do not deduct secur or exemptions | ? |
| | - | furniture, linens, china, kitchenwar | | | \$500 | | |
| | Televisions and rac | dios; audio, video, stereo, and digi including cell phones, cameras, n | tal equipment; computers, printer | rs, scanners; music | \$666 | \$ | 500.00 |
| Yes. | Describe | 2 TV, cell phone | | | \$300 | \$ | 300.00 |
| | Antiques and figuri | nes; paintings, prints, or other arty collections; other collections, mem | | objects; | | | |
| Yes. | Describe | | | | | \$ | 0.00 |

Debtor 1

Emma

Case 16-32093

| _ | | |
|-------|---------|--|
| LIDEC | NASIN | |
| Desc | iviaiii | |
| | | |

| | | 7220 |
|---------------|-----------------|------------|
| | | Docui |
| Florid Minner | Add data Norman | Last Manag |

| 09. | Examples: | | hobbies nic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes nusical instruments | | |
|-----|------------------------------------|-------------------------------|--|--|-------------------|
| | Yes. | Describe | | | 0.00 |
| 10. | Firearms Examples: | Pistols, rifles, shot | guns, ammunition, and related equipment | ı | |
| | Yes. | Describe | |] s | 0.00 |
| 11. | Clothes Examples: | Everyday clothes, | furs, leather coats, designer wear, shoes, accessories | | |
| | Yes. | Describe | Everyday clothes, shoes, accessories \$100 | • | 100.00 |
| 12. | Jewelry Examples: gold, silver No. | Everyday jewelry, | costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, | • | 100.0 |
| | Yes. | Describe | Costume jewelry \$25 | • | 25.00 |
| 13. | Non-farm a Examples: No. | animals Dogs, cats, birds, | horses | J \$ | 20.0 |
| | Yes. | Describe | | \$ | 0.00 |
| 14. | Any other No. | personal and ho | ousehold items you did not already list, including any health aids you did not list | | |
| | Yes. | Describe | Books, CDs, DVDs & Family Photos \$50 | | E0.00 |
| 15. | Add the do | llar value of all | of your entries from Part 3, including any entries for pages you have attached | \$ | 50.00 \$975.00 |
| | for Part 3. | Write that numb | per here> | | |
| | an C | Pescribe Your Fir | or equitable interest in any of the following? | Current value of portion you own Do not deduct secur or exemptions | • |
| 16. | Cash Examples: | | n your wallet, in your home, in a safe deposit box, and on hand when you file your petition | | |
| | Yes. | Describe | | \$ | 0.00 |
| 17. | | Checking, savings | , or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, If you have multiple accounts with the same institution, list each. | | |
| | Yes. | Describe | Account Type: Institution name: Other financial account Pre-paid debit | \$ | 0.00 |
| 18. | | | rublicly traded stocks tment accounts with brokerage firms, money market accounts | \$ | 0.00 |
| | Yes. | Describe | Institution or issuer name: | \$ | 0.00 |
| 19. | Non-public No. | cly traded stock | and interests in incorporated and unincorporated businesses, including an interest in | · | |
| | Yes. | Describe | Name of Entity and Percent of Ownership: | \$ | 0.00 |

Debtor 1

Emma

Case 16-32093 Doc 1

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Document Page 12 of 56 Pumber (if known)

Desc Main

First Name

| lama. | | |
|-------|--|--|

| 20. | Negotiable | instruments includ | te bonds and other negotiable and non-negotiable instruments the personal checks, cashiers' checks, promissory notes, and money orders. The those you cannot transfer to someone by signing or delivering them. | | |
|-----|-------------------|-----------------------------------|--|---|------|
| | Yes. | Describe | Issuer name: | \$ | 0.00 |
| 21. | | or pension acounterests in IRA, E | counts RISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans | · | |
| | Yes. | Describe | Type of account and Institution name: | \$ | 0.00 |
| 22. | Your share | | osits you have made so that you may continue service or use from a company andlords, prepaid rent, public utilities (electric, gas, water), telecommunications | ↓ | |
| 23. | | Describe A contract for a | Institution name or individual: a periodic payment of money to you, either for life or for a number of years) | \$ | 0.00 |
| | No. Yes. | Describe | Issuer name and description: | \$ | 0.00 |
| 24. | | | IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. (b), and 529(b)(1). | | |
| 25 | Yes. | Describe | Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): | \$ | 0.00 |
| 20. | No. | | s interests in property (other than anything listed in line 1), and rights of powers | | |
| | Yes. | Describe | | \$ | 0.00 |
| 26. | | | emarks, trade secrets, and other intellectual property ames, websites, proceeds from royalties and licensing agreements | | |
| | Yes. | Describe | | \$ | 0.00 |
| 27. | | | other general intangibles exclusive licenses, cooperative association holdings, liquor licenses, professional licenses | | |
| | Yes. | Describe | | \$ | 0.00 |
| Mo | ney or prop | erty owed to yo | ou? | Current value of the portion you own? Do not deduct secured or exemptions | |
| 28. | Tax refund No. | s owed to you | | | |
| | Yes. | Describe | | \$ | 0.00 |
| 29. | Examples: I | - | sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement | | |
| | Yes. | Describe | | \$ | 0.00 |
| 30. | Examples: I | | owes you sability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, aid loans you made to someone else | | |
| | Yes. | Describe | | \$ | 0.00 |

Debtor 1

Emma

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Desc Main

First Name Middle Name

| | Dunn | _ |
|--|-----------|---|
| | Documen | |
| | Last Name | |

| 31. | Interest in | insurance polic | es | | |
|---|--|---|--|---|-------------------------|
| | Examples: | Health, disability, o | r life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance | | |
| | No. | | Company Name & Beneficiary: | - | |
| | Yes. | Describe | | | |
| 22 | A ny intoro | at in property th | ot is due you from company who has died | \$ | 0.00 |
| 32. | - | | at is due you from someone who has died iving trust, expect proceeds from a life insurance policy, or are currently entitled to receive | | |
| | • | ecause someone ha | | | |
| | No. | | | | |
| | Yes. | Describe | | | |
| | | | | \$ | 0.00 |
| 33. | _ | - | s, whether or not you have filed a lawsuit or made a demand for payment | | |
| | | Accidents, employ | ment disputes, insurance claims, or rights to sue | | |
| | No. | | | 7 | |
| | Yes. | Describe | | | 0.00 |
| 24 | Other cent | tingent and unli | quidated claims of every nature, including counterclaims of the debtor and rights | \$ | 0.00 |
| 34. | No. | ungent and unit | quidated claims of every flature, including counterclaims of the debtor and rights | | |
| | = | Dogoribo | | 7 | |
| | Yes. | Describe | | • | 0.00 |
| 35. | Any financ | cial assets you d | id not already list | Ψ | |
| | No. | , | | | |
| | Yes. | Describe | | 7 | |
| | | D0001100 | | \$ | 0.00 |
| | | | | | |
| 36. | Add the do | ollar value of all | of your entries from Part 4, including any entries for pages you have attached | | - 1 |
| | for Part 4. \ | Write that numb | er here> | | \$0.00 |
| | | | | | |
| F | Part 5: | Describe Any Bus | iness-Related Property You Own or Have an Interest In. List any real estate in Part 1. | | |
| 37. | Do you ow | n or have any le | gal or equitable interest in any business-related property? | | |
| | | | | | |
| | No. | | gar or oquinatio mission missing account to property . | | |
| | _ | | gar or oquinasio many 2000000 roman proporty. | | |
| | No. | | gar or oquinaso many 20011000 rollino proporty. | Current value of | the |
| | No. | | | Current value of | |
| | No. | | gar or oquinaso many 20011000 rough opony. | Current value of portion you own | ? |
| | No. | | | portion you own | ? |
| 38. | No. Yes. | | mmissions you already earned | portion you own Do not deduct secur | ? |
| 38. | No. Yes. | | | portion you own Do not deduct secur | ? |
| 38. | No. Yes. | | | portion you own Do not deduct secur | ? |
| | No. Yes. Accounts No. Yes. | receivable or co | mmissions you already earned | portion you own Do not deduct secur | ? |
| | Accounts No. Yes. Accounts No. Yes. | receivable or co Describe ipment, furnishi | mmissions you already earned | portion you own Do not deduct secur | ? ed claims |
| | No. Yes. Accounts No. Yes. Office equ Examples: | receivable or co Describe ipment, furnishi | mmissions you already earned | portion you own Do not deduct secur | ? ed claims |
| | Accounts No. Yes. Office equ Examples: No. | receivable or co Describe ipment, furnishi Business-related c | mmissions you already earned | portion you own Do not deduct secur | ? ed claims |
| | No. Yes. Accounts No. Yes. Office equ Examples: | receivable or co Describe ipment, furnishi | mmissions you already earned | portion you own Do not deduct secur | ed claims |
| 39. | Accounts No. Yes. Office equ Examples: No. Yes. | receivable or co Describe ipment, furnishi Business-related co Describe | mmissions you already earned ngs, and supplies computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices | portion you own Do not deduct secur | ? ed claims |
| 39. | Accounts No. Yes. Office equ Examples: No. Yes. Machinery | receivable or co Describe ipment, furnishi Business-related co Describe | mmissions you already earned | portion you own Do not deduct secur | ? ed claims 0.00 |
| 39. | Accounts No. Yes. Office equ Examples: No. Yes. Machinery No. | receivable or co Describe ipment, furnishi Business-related c Describe r, fixtures, equip | mmissions you already earned ngs, and supplies computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices | portion you own Do not deduct secur | ? ed claims 0.00 |
| 39. | Accounts No. Yes. Office equ Examples: No. Yes. Machinery | receivable or co Describe ipment, furnishi Business-related co Describe | mmissions you already earned ngs, and supplies computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices | portion you own Do not deduct secur | 0.00 |
| 39. 40. | Accounts No. Yes. No. Yes. Office equ Examples: No. Yes. Machinery No. Yes. | receivable or co Describe ipment, furnishi Business-related c Describe r, fixtures, equip | mmissions you already earned ngs, and supplies computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices | portion you own Do not deduct secur | ed claims |
| 39. 40. | Accounts No. Yes. Office equ Examples: No. Yes. Machinery No. | receivable or co Describe ipment, furnishi Business-related c Describe r, fixtures, equip | mmissions you already earned ngs, and supplies computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices | portion you own Do not deduct secur | 0.00 |
| 39. 40. | No. Yes. Accounts No. Yes. Office equexamples: No. Yes. Machinery No. Yes. Inventory No. | receivable or co Describe ipment, furnishi Business-related c Describe f, fixtures, equip Describe | mmissions you already earned ngs, and supplies computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices | portion you own Do not deduct secur | 9 ed claims 0.00 0.00 |
| 39. 40. | No. Yes. Accounts No. Yes. Office equexamples: No. Yes. Machinery No. Yes. | receivable or co Describe ipment, furnishi Business-related c Describe r, fixtures, equip | mmissions you already earned ngs, and supplies computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices | portion you own Do not deduct secur | 9 ed claims 0.00 0.00 |
| 39. 40. | No. Yes. Accounts No. Yes. Office equexamples: No. Yes. Machinery No. Yes. Inventory No. Yes. | receivable or co Describe ipment, furnishi Business-related c Describe f, fixtures, equip Describe | mmissions you already earned ngs, and supplies omputers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices ment, supplies you use in business, and tools of your trade | portion you own Do not deduct secur or exemptions \$ | 0.00 0.00 |
| 39. 40. | No. Yes. Accounts No. Yes. Office equexamples: No. Yes. Machinery No. Yes. Inventory No. Yes. | receivable or co Describe ipment, furnishi Business-related c Describe fixtures, equip Describe | mmissions you already earned ngs, and supplies omputers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices ment, supplies you use in business, and tools of your trade | portion you own Do not deduct secur or exemptions \$ | 0.00 0.00 |
| 39. 40. | No. Yes. Accounts No. Yes. Office equexamples: No. Yes. Machinery No. Yes. Inventory No. Yes. Interests in | receivable or co Describe ipment, furnishi Business-related c Describe fixtures, equip Describe | mmissions you already earned ngs, and supplies computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices ment, supplies you use in business, and tools of your trade r joint ventures | portion you own Do not deduct secur or exemptions \$ | 0.00 0.00 |
| 39. 40. | No. Yes. Accounts No. Yes. Office equ Examples: No. Yes. Machinery No. Yes. Inventory No. Yes. | receivable or co Describe ipment, furnishi Business-related c Describe r, fixtures, equip Describe Describe | mmissions you already earned ngs, and supplies computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices ment, supplies you use in business, and tools of your trade r joint ventures | portion you own Do not deduct secur or exemptions \$ | 0.00 0.00 |
| 39.40.41.42. | Accounts No. Yes. No. Yes. Office equexamples: No. Yes. Machinery No. Yes. Inventory No. Yes. Interests it No. Yes. | receivable or co Describe ipment, furnishi Business-related c Describe r, fixtures, equip Describe Describe n partnerships c Describe | mmissions you already earned ngs, and supplies computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices ment, supplies you use in business, and tools of your trade r joint ventures | s | 0.00 0.00 |
| 39.40.41.42. | Accounts No. Yes. No. Yes. Office equexamples: No. Yes. Machinery No. Yes. Inventory No. Yes. Interests it No. Yes. | receivable or co Describe ipment, furnishi Business-related c Describe r, fixtures, equip Describe Describe n partnerships c Describe | mmissions you already earned Ings, and supplies In | s | 0.00 0.00 |
| 39.40.41.42. | No. Yes. Accounts No. Yes. Office eque Examples: No. Yes. No. Yes. Machinery No. Yes. Inventory No. Yes. Interests in No. Yes. Customer | receivable or co Describe ipment, furnishi Business-related c Describe r, fixtures, equip Describe Describe n partnerships c Describe | mmissions you already earned Ings, and supplies In | s | 0.00 0.00 |

Debtor 1 Emma Case 16-32093 Doc 1 Filed 10/07/16 Entered 10/07/16 11:08:05 Desc Main Document Page 14 of 56

44. Any business-related property you did not already list Nο Describe..... 0.00 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached \$ 0.00 for Part 5. Write that number here Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Yes. Describe..... 0.00 47. Farm animals Examples: Livestock, poultry, farm-raised fish No. Describe..... 0.00 48. Crops-either growing or harvested No. Yes. Describe..... 0.00 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade No. Yes. Describe..... 0.00 50. Farm and fishing supplies, chemicals, and feed Yes. Describe..... 0.00 51. Any farm- and commercial fishing-related property you did not already list Yes Describe..... 0.00 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached \$0.00 for Part 6. Write that number here ----Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No. Describe..... Yes. 0.00

54. Add the dollar value of all of your entries from Part 7. Write that number here -->

\$0.00

Debtor 1 Emma Cas

___ Case 16-32093

63. Total of all property on Schedule A/B. Add line 55 + line 62

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Document

Doc 1

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\$975.00

First Name List the Totals of Each Part of this Form Part 8: \$ 0.00 55. Part 1: Total real estate, line 2 \$ 0.00 56. Part 2: Total vehicles, line 5 \$ 975.00 57. Part 3: Total personal and household items, line 15 \$ 0.00 58. Part 4: Total financial assets, line 36 \$ 0.00 59. Part 5: Total business-related property, line 45 \$ 0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$ 0.00 61. Part 7: Total other property not listed, line 54 \$ 975.00 \$ 975.00 62. Total personal property. Add lines 56 through 61.

Official Form 106A/B Record # 711898 Schedule A/B: Property Page 6 of 6

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| Fill in this in | Fill in this information to identify your case: | | | | | |
|---------------------|---|-------------------------------------|-----------------|--|--|--|
| Debtor 1 | Emma | Jean | Dunn | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States | Bankruptcy Court for t | the : <u>NORTHERN</u> District of _ | ILLINOIS(State) | | | |
| Case Number | r | | | | | |
| (If known) | | | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions-such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| 1. Which set of ex | emptions are you claiming? Check | one only, even if your spo | ouse is filing with you. | |
|-------------------------|--|--------------------------------------|---|--------------------------------------|
| = | ming state and federal nonbankrupto | | § 522(b)(3) | |
| You are clair | ming federal exemptions. 11 U.S.C. | § 522(b)(2) | | |
| 2. For any propert | y you list on <i>Schedule A/B</i> that yo | u claim as exempt, fill in t | the information below. | |
| • | on of the property and line on hat lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Check only one box for each exemption | |
| Brief description: | Furniture, linens, small appliances, table & chairs, bedroom set | \$ <u>500</u> | \$ | 735 ILCS 5/12-1001(b) - \$500.00 |
| Line from Schedule A/B: | 06 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | 2 TV, cell phone | \$_300 | | 735 ILCS 5/12-1001(b) - \$300.00 |
| Line from Schedule A/B: | 07 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | Everyday clothes, shoes, accessories | \$ <u>100</u> | \$ | 735 ILCS 5/12-1001(a),(e) - \$100.00 |
| Line from Schedule A/B: | 11 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | Costume jewelry | \$ <u>25</u> | \$ | 735 ILCS 5/12-1001(b) - \$25.00 |
| Line from Schedule A/B: | 12 | | 100% of fair market value, up to any applicable statutory limit | |
| | | | | |
| Official Form 106C | Record # 711898 | Schedule C: T | he Property You Claim as Exempt | Page 1 of 2 |

Case 16-32093 Doc 1 Filed 10/07/16 Entered 10/07/16 11:08:05 Desc Main Page 17 of 56 Case Number (if known)

Last Name

Dogument Emma Jean Debtor 1

Middle Name

First Name

| Part 2: Addit | ional Page | | | |
|---|---|--------------------------------------|---|------------------------------------|
| Brief description of the property and line on Schedule A/B that lists this property | | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Check only one box for each exemption | |
| Brief description: | Books, CDs, DVDs & Family Photos | \$_50 | \$ | 735 ILCS 5/12-1001(a) - \$50.00 |
| Line from Schedule A/B: | 14 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | Other financial account, Pre-paid debit, 0.00 | \$_0 | | 735 ILCS 5/12-1001(b) - \$0.00 |
| Line from Schedule A/B: | <u>17</u> | | 100% of fair market value, up to any applicable statutory limit | |
| Are vou claimin | g a homestead exemption of more | than \$155.675? | | |
| No. Yes. Did you No Yes. | u acquire the property covered by th | e exemption within 1,215 c | days before you filed this case? | |
| La res. | | | | |
| | | | | |
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| | | | | |
| | | | | |
| Official Form 1060 | Record # 711898 | Schedule C: T | he Property You Claim as Exempt | Page 2 of 2 |

| Fill in this in | Caso 16 Iformation to ident | | Filod 10/07/16 | stored 10/07/16 8 of 56 | 11:08:05 | Desc Main | |
|---|---|---|--|------------------------------|--|--|--------------------------|
| Debtor 1 | Emma | Jean | Dunn | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | - | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States | Bankruptcy Court for | the : <u>NORTHERN</u> District of _ | ILLINOIS | | | | |
| Case Number | r | | (State) | | | Check if this | s is an |
| (If known) | · | | | | | amended fil | ling |
| information. If radditional page 1. Do any cre No. Ch | more space is need es, write your name ditors have claims neck this box and so | ded, copy the Additional Page e and case number (if known) secured by your property? ubmit this form to the court with | e are filing together, both are ea, fill it out, number the entries h your other schedules. You have | , and attach it to this forn | n. On the top of a | ny | |
| | ll in all of the inform | | | | | | |
| | | | | | Column A | Column A | Column C |
| for each c | laim. If more than | one creditor has a particular cla | cured claim, list the creditor sepa aim, list the other creditors in Pa according to the creditors name. | ırt 2. | Amount of claim On not deduct the alue of collateral | Value of collateral that supports this claim | Unsecured portion If any |
| | | | | | | | |

| | Caso 16 2200 |)2 Doc 1 | Filed 10/07/16 | Entered 10/07/16 11:08:05 | Desc Main | |
|--|---|---|--|--|---------------------------------|----------------|
| Fill in this | s information to identify your | case: | | 9 of 56 | | |
| Debtor 1 | Emma | Jean | Dunn | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing | ng) First Name | Middle Name | Last Name | | | |
| United Sta | ates Bankruptcy Court for the : <u>N</u> | ORTHERN District | of <u>ILLINOIS</u> (State) | | | |
| Case Nun | nber | | | | Check if t | |
| (If known) | - 100F/F | | | | amended | filing |
| <u> Official</u> | Form 106E/F | | | | | |
| <u>schedu</u> | le E/F: Creditors V | Vho Have U | nsecured Claims |) | | 12/15 |
| ist the other I/B: Proper reditors with eeded, cop op of any a | er party to any executory cont ty (Official Form 106A/B) and th partially secured claims that | racts or unexpired on Schedule G: Ex at are listed in Sch , number the entric ime and case numl | leases that could result in recutory Contracts and Un- edule D: Creditors Who Ha es in the boxes on the left. A | is and Part 2 for creditors with NONPRIORITY c a claim. Also list executory contracts on Schece expired Leases (Official Form 106G). Do not inc ve Claims Secured by Property. If more space i Attach the Continuation Page to this page. On the | <i>dul</i> e clude any is | |
| Part 1: | | | | | | |
| | creditors have priority unsec | ured claims agains | t you? | | | |
| _ | Go to Part 2. | | | | | |
| ∐ Yes | | ims. If a creditor ha | as more than one priority una | secured claim, list the creditor separately for each | ı claim For | |
| each cla | aim listed, identify what type of rity amounts. As much as poss | claim it is. If a clain ible, list the claims | n has both priority and nonpoint alphabetical order accord | riority amounts, list that claim here and show both ing to the creditor's name. If you have more than bolds a particular claim, list the other creditors in Pa | n priority and two priority | |
| (For an | explanation of each type of cla | im, see the instruct | ions for this form in the instr | uction booklet.) Total claim | Priority | Nonpriority |
| | _ | | | i otal cialiii | amount | amount |
| Part 2: | List All of Your NONPRIORIT | Y Unsecured Claim | s | | | |
| 3. Do any | creditors have nonpriority un | secured claims ag | ainst you? | | | |
| No. | You have nothing to report in | this part. Submit th | is form to the court with you | r other schedules. | | |
| Yes | | | | | | |
| nonprio | rity unsecured claim, list the cre | editor separately for | r each claim. For each claim | or who holds each claim. If a creditor has more to listed, identify what type of claim it is. Do not list litors in Part 3.If you have more than three nonpriduals. | claims already | |
| claims f | ill out the Continuation Page of | Part 2. | | | | Total claim |
| 4.1 Actio | on Card | Las | t 4 digits of account number | | | \$ <u>0.00</u> |
| | or's Name Box 105555 | Wh | en was the debt incurred? | | | |
| Numb | per Street | | | | | |
| | | | of the date you file, the claim | is: Check all that apply. | | |
| Atlar | nta GA 3 | 30348 | Contingent | | | |
| City | State : | Zip Code | Unliquidated Disputed | | | |
| _ | otor 1 only | Ь | ., | | | |
| = | otor 2 only | <u> Ty</u> p | e of NONPRIORITY unsecure | ed claim: | | |
| Deb | otor 1 and Debtor 2 only | | Student loans | | | |
| At le | east one of the debtors and anothe | _ | Obligations arising out of a sepa | | | |
| | eck if this claim relates to a nmunity debt | | that you did not report as priority | y claims ng plans, and other similar debts | | |
| | claim subject to offest? | Ц | Denis to betision of brotte-snaring | y pians, and other sillillal debts | | |
| No | | | Other. Specify Notice Only | | | |
| Yes | | | | | | |

Doc 1 Filed 10/07/16 Entered 10/07/16 11:08:05 Desc Main Case 16-32093 Page 20 of 56 Document Emma Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** Archer Bank \$ 2,800.00 Last 4 digits of account number _ Creditor's Name 4970 S. Archer Ave. When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent 60632 Chicago Unliquidated State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? No Other. Specify Credit Card or Credit Use Yes Beneficial National Bank Last 4 digits of account number 4.3 Creditor's Name PO Box 5877 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply.

Record # 711898

Doc 1 Filed 10/07/16 Entered 10/07/16 11:08:05 Desc Main Case 16-32093 Page 21 of 56 Case Number (if known) **Document** Emma Jean Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** 4.5 COMENITY CAPITAL/Blair \$ 23.00 Last 4 digits of account number

| 4.5 | | Last 4 digits of account number | ¥ |
|-----|--|---|--------------------|
| | Creditor's Name | 2045 2040 | |
| | Po Box 182120 | When was the debt incurred? 2015-2016 | |
| | Number Street | | |
| | | As af the date was file the elected by Observation | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Oct 10040 | Contingent | |
| | Columbus OH 43218 | Unliquidated | |
| | City State Zip Code | Disputed | |
| ' | Who owes the debt? Check one. | | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| l î | Debtor 1 and Debtor 2 only | Student loans | |
| l i | | Obligations arising out of a separation agreement or divorce | |
| 1 ! | At least one of the debtors and another | | |
| | Check if this claim relates to a | that you did not report as priority claims | |
| | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| ! | s the claim subject to offest? | | |
| | No | Other. Specify Credit Card or Credit Use | |
| | Yes | | |
| 4.6 | Derrick Richardson | Last 4 digits of account number1911 | \$ 0.00 |
| | Creditor's Name | | |
| | C/O Lambert Karchmar PC | When was the debt incurred? | |
| | Number Street | | |
| | | | |
| | 211 W. Wacker #1400 | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Chicago IL 60606 | Unliquidated | |
| | City State Zip Code | Disputed | |
| ' | Who owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| l i | Debtor 1 and Debtor 2 only | Student loans | |
| l i | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| 1 8 | | that you did not report as priority claims | |
| 1 1 | Check if this claim relates to a | | |
| Ι. | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| l i | s the claim subject to offest? | _ | |
| 1 1 | No | Other. Specify Debt Owed | |
| | Yes | | |
| 4.7 | Fingerhut Direct Mrkting | Last 4 digits of account number 5501 | \$ <u>1,277.00</u> |
| | Creditor's Name | 2040 2040 | |
| | 16 Mcleland Rd | When was the debt incurred? 2012-2012 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | | |
| 1 | Saint Cloud MN 56303 | Contingent | |
| | | Unliquidated | |
| , | City State Zip Code Who owes the debt? Check one. | Disputed | |
| | Debtor 1 only | - | |
| 1 1 | = | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: □ | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| j | Check if this claim relates to a | that you did not report as priority claims | |
| 1 ' | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| 1 | s the claim subject to offest? | <u> </u> | |
| | No | Other. Specify Unknown Credit Extension | |
| | Yes | Other, specify | |
| | 100 | | |

Doc 1 Filed 10/07/16 Entered 10/07/16 11:08:05 Desc Main Case 16-32093 Page 22 of 56 Case Number (if known) **Document** Emma Jean Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** 4.8 GE Money BANK \$ 3,008.00 Last 4 digits of account number ____

| | 2012 2012 | |
|---|--|--------------------|
| 2365 Northside Dr Ste 30 | When was the debt incurred? 2012-2013 | |
| Number Street | | |
| | As of the date you file, the claim is: Check all that apply. | |
| | Contingent | |
| San Diego CA 92108 | ☐ Unliquidated | |
| City State Zip Code | Disputed | |
| Who owes the debt? Check one. | Disputed | |
| Debtor 1 only | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | Student loans | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| Check if this claim relates to a | that you did not report as priority claims | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offest? | | |
| No | Other. Specify Unknown Credit Extension | |
| Yes | | 4.077.00 |
| 4.9 Jefferson Capital Systems | Last 4 digits of account number | \$ <u>1,277.00</u> |
| Creditor's Name | | |
| 16 McLeland Road | When was the debt incurred? | |
| Number Street | | |
| | As of the date you file, the claim is: Check all that apply. | |
| | Contingent | |
| St. Cloud MN 56303 | ☐ Unliquidated | |
| City State Zip Code | ☐ Disputed | |
| Who owes the debt? Check one. | | |
| Debtor 1 only | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | Student loans | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| Check if this claim relates to a | that you did not report as priority claims | |
| a a construction of a late | Debte to pencion or profit charing plane, and other similar debte | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offest? | Debts to pension or profit-straining plans, and other similar debts | |
| Is the claim subject to offest? | Other. Specify | |
| Is the claim subject to offest? No Yes | Other. Specify | 200.00 |
| Is the claim subject to offest? No Yes 4.10 Loretto Hospital | | \$ <u>800.00</u> |
| Is the claim subject to offest? No Yes 4.10 Creditor's Name | Other. Specify | \$ <u>800.00</u> |
| Is the claim subject to offest? No Yes 4.10 Creditor's Name 645 S. Central | Other. Specify | \$_800.00 |
| Is the claim subject to offest? No Yes 4.10 Creditor's Name | Other. Specify | \$ <u>800.00</u> |
| Is the claim subject to offest? No Yes 4.10 Creditor's Name 645 S. Central | Other. Specify | \$ <u>800.00</u> |
| Is the claim subject to offest? No Yes 4.10 Creditor's Name 645 S. Central Number Street | Other. Specify Last 4 digits of account number When was the debt incurred? | \$ <u>800.00</u> |
| Is the claim subject to offest? No Yes 4.10 Loretto Hospital Creditor's Name 645 S. Central Number Street Chicago IL 60644 | Cother. Specify Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. | \$ <u>800.00</u> |
| Is the claim subject to offest? No Yes 4.10 Creditor's Name 645 S. Central Number Street Chicago IL 60644 City State Zip Code | Contingent Other. Specify Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. | \$ <u>800.00</u> |
| Is the claim subject to offest? No Yes 4.10 Loretto Hospital Creditor's Name 645 S. Central Number Street Chicago IL 60644 City State Zip Code Who owes the debt? Check one. | Contingent Unliquidated Other. Specify Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Unliquidated | \$ <u>800.00</u> |
| Is the claim subject to offest? No Yes 4.10 Loretto Hospital Creditor's Name 645 S. Central Number Street Chicago IL 60644 City State Zip Code Who owes the debt? Check one. Debtor 1 only | Contingent Unliquidated Disputed | \$ <u>800.00</u> |
| Is the claim subject to offest? No Yes 4.10 Loretto Hospital Creditor's Name 645 S. Central Number Street Chicago IL 60644 City State Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only | Contingent Unliquidated Disputed Other. Specify Last 4 digits of account number | \$ <u>800.00</u> |
| Is the claim subject to offest? No Yes 4.10 Loretto Hospital Creditor's Name 645 S. Central Number Street Chicago IL 60644 City State Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans | \$ <u>800.00</u> |
| Is the claim subject to offest? No Yes 4.10 Loretto Hospital Creditor's Name 645 S. Central Number Street Chicago IL 60644 City State Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce | \$ <u>800.00</u> |
| Is the claim subject to offest? No Yes 4.10 Loretto Hospital Creditor's Name 645 S. Central Number Street Chicago IL 60644 City State Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a | Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims | \$ <u>800.00</u> |
| Is the claim subject to offest? No Yes 4.10 Loretto Hospital Creditor's Name 645 S. Central Number Street Chicago IL 60644 City State Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt | Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce | \$ <u>800.00</u> |
| Is the claim subject to offest? No Yes 4.10 Loretto Hospital Creditor's Name 645 S. Central Number Street Chicago IL 60644 City State Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a | Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims | \$ <u>800.00</u> |

Doc 1 Filed 10/07/16 Entered 10/07/16 11:08:05 Desc Main Case 16-32093 Page 23 of 56 Case Number (if known) Document Emma Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** M3 Financial Services \$ 26.00 4.11 Last 4 digits of account number _ Creditor's Name 2014-2014 10330 W Roosevelt Rd S-2 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Westchester 60154 Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? No Other. Specify Medical Debt Yes Merrick Bank \$ 3,000.00 4.12 Last 4 digits of account number Creditor's Name PO Box 23356 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent 15222 Pittsburgh PA Unliquidated City State Zip Code Disputed Who owes the debt? Check one.

Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a Debts to pension or profit-sharing plans, and other similar debts community debt Is the claim subject to offest? No Other. Specify ___ Credit Card or Credit Use Yes Orchard Bank \$ 2,500.00 4.13 Last 4 digits of account number Creditor's Name 941 Corporate Center Dr. When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Pomona CA 91768-2642 Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? No Other. Specify ___Credit Card or Credit Use

Doc 1 Filed 10/07/16 Entered 10/07/16 11:08:05 Desc Main Case 16-32093 Page 24 of 56 Case Number (if known) **Document** Emma Jean Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** ¢ 1 800 00

| 4.14 St. Mary's Hospital | Last 4 digits of account number | \$ <u>1,800.00</u> |
|---|---|---------------------------------------|
| Creditor's Name | | |
| 55 East 86th Avenue Suite A | When was the debt incurred? | |
| Number Street | | |
| P.O. Box 10645 | | |
| P.O. BOX 10045 | As of the date you file, the claim is: Check all that apply. | |
| | Contingent | |
| Merrillville IN 46411 | Unliquidated | |
| City State Zip Code | Disputed | |
| Who owes the debt? Check one. | Disputed | |
| Debtor 1 only | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | Student loans | |
| | | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| Check if this claim relates to a | that you did not report as priority claims | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offest? | | |
| No | Other. Specify Medical/Dental Services | |
| Yes | | |
| 4.15 Syncb/JCP | Last 4 digits of account number NULL | \$ 2,265.00 |
| Creditor's Name | | · · · · · · · · · · · · · · · · · · · |
| Po Box 965007 | When was the debt incurred? 2006-2011 | |
| | | |
| Number Street | | |
| | As of the date you file, the claim is: Check all that apply. | |
| | Contingent | |
| Orlando FL 32896 | | |
| City State Zip Code | Unliquidated | |
| Who owes the debt? Check one. | Disputed | |
| Debtor 1 only | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | | |
| Debtor 1 and Debtor 2 only | Student loans | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| Check if this claim relates to a | that you did not report as priority claims | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offest? | | |
| No | Other. Specify Credit Card or Credit Use | |
| Yes | Other. Specify | |
| Most Cuburban Hasnital | Last 4 digits of account number | \$ 1,500.00 |
| 4.10 | Last 4 digits of account number | Ψ,σσσ.σσ |
| Creditor's Name PO Box 4746 | When was the debt incurred? | |
| | When was the dept incurred: | |
| Number Street | | |
| | As of the date you file, the claim is: Check all that apply. | |
| | Contingent | |
| Carol Stream IL 60197-4746 | | |
| City State Zip Code | Unliquidated | |
| Who owes the debt? Check one. | Disputed | |
| Debtor 1 only | | |
| Debtor 2 only | Type of NONDRIORITY uncocured claim: | |
| | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | ☐ Student loans | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| Check if this claim relates to a | that you did not report as priority claims | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offest? | | |
| No | Other. Specify Medical/Dental Service | |
| Yes | Outer, Specify | |
| | | |

Official Form 106E/F

Case 16-32093

മൂറ്റument

Doc 1 Filed 10/07/16 Entered 10/07/16 11:08:05 Desc Main

Emma Debtor 1

Jean

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| 1 | ė | | |
|---|---|--|--|
| | - | | |

List Others to Be Notified for a Debt That You Already Listed

| . Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. | | | | | | | | |
|--|--------------|--|---|--|--|--|--|--|
| Beneficial National Bank | | On which entry in Part 1 or Part 2 lis | st the original creditor? | | | | | |
| Name 2929 Walden Ave | | Line 3 of (Check one): | Part 1: Creditors with Priority Unsecured Claims | | | | | |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured Claims | | | | | |
| <u> </u> | 14043 | Last 4 digits of account number | | | | | | |
| City State Zip Co | ode | On which entry in Part 1 or Part 2 lis | st the original creditor? | | | | | |
| Name 50 W. Washington St., Rm. 1001 | | Line 4 of (Check one): | Part 1: Creditors with Priority Unsecured Claims | | | | | |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured Claims | | | | | |
| | | | | | | | | |
| Chicago IL City State Zip Cr | 60602 | Last 4 digits of account number | | | | | | |
| Keith S. Shindler | | On which entry in Part 1 or Part 2 lis | st the original creditor? | | | | | |
| Name 1990 E. Algonquin #180 | | Line 4 of (Check one): | Part 1: Creditors with Priority Unsecured Claims | | | | | |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured Claims | | | | | |
| | | | | | | | | |
| Schaumburg IL City State Zip C | 60173 ode | Last 4 digits of account number | | | | | | |
| Clerk, First Mun Div | | On which entry in Part 1 or Part 2 lis | st the original creditor? | | | | | |
| Name 50 W. Washington St., Rm. 1001 | | Line 6 of (Check one): | Part 1: Creditors with Priority Unsecured Claims | | | | | |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured Claims | | | | | |
| Chicago | 00000 | | 1011 | | | | | |
| Chicago IL City State Zip Co | 60602 ode | Last 4 digits of account number | | | | | | |
| Clerk, First Mun Div | | On which entry in Part 1 or Part 2 lis | st the original creditor? | | | | | |
| Name 50 W. Washington St., Rm. 1001 | | Line 8 of (Check one): | Part 1: Creditors with Priority Unsecured Claims | | | | | |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured Claims | | | | | |
| Chicago IL | 60602 | Last 4 digits of account number | 0390 | | | | | |
| City State Zip Co | | Last 4 digits of account number | | | | | | |
| Blitt and Gaines, PC | | On which entry in Part 1 or Part 2 lis | st the original creditor? | | | | | |
| Name 661 Glenn Ave. | | Line 8 of (Check one): | Part 1: Creditors with Priority Unsecured Claims | | | | | |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured Claims | | | | | |
| Wheeling IL | 60090 | Last 4 digits of account number | 0390 | | | | | |
| City State Zip C | | | | | | | | |

Official Form 106E/F

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| ebtor 1 ⊑ | IIIIIa | Jean | Dulin - | Case | Number (if known) |
|------------------|------------------------|-------------|----------------|--------------------------------------|---|
| Fi | irst Name | Middle Name | Last Name | | |
| West Su | ıburban Hospital | | _ | On which entry in Part 1 or Part 2 I | list the original creditor? |
| Name PO Box | 4746 | | | Line 11 of (Check one): | Part 1: Creditors with Priority Unsecured Claims |
| Number | Street | | - | | Part 2: Creditors with Nonpriority Unsecured Claims |
| Carol St | ream | IL | - 60197-474 | Last 4 digits of account number _ | <u>6278</u> |
| City | | State Zip C | Code | | |
| West Su | iburban Medical Center | | - | On which entry in Part 1 or Part 2 I | ist the original creditor? |
| Name 909 Hide | den Ridge | | _ | Line 11 of (Check one): | Part 1: Creditors with Priority Unsecured Claims |
| Number | Street | | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| Suite 30 | 0 | | - | | |
| Irving | | | 75038 | Last 4 digits of account number _ | 6278 |
| City | | State Zip (| Code | | |
| Orchard | Bank | | _ | On which entry in Part 1 or Part 2 I | list the original creditor? |
| Name Po Box 8 | 80061 | | | Line13 of (Check one): | Part 1: Creditors with Priority Unsecured Claims |
| Number | Street | | - | | Part 2: Creditors with Nonpriority Unsecured Claims |
| Salinas | | CA | 93912 | Last 4 digits of account number _ | |
| City | | State Zip C | - Code | | |
| St. Mary | of Nazareth Hospital | | | On which entry in Part 1 or Part 2 I | list the original creditor? |
| Name 2233 W. | . Division | | - | Line 14 of (Check one): | Part 1: Creditors with Priority Unsecured Claims |
| Number | Street | | - | | Part 2: Creditors with Nonpriority Unsecured Claims |
| Chicago | | IL | 60622 | Last 4 digits of account number _ | |
| City | | State Zip C | - Code | - | _ |

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Schedule E/F: Creditors Who Have Unsecured Claims

Emma Debtor 1

Jean

Document

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Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

| | | | Total claim |
|--------------------------|---|------------|--------------|
| Total claims from Part 1 | 6a. Domestic support obligations | 6a. | \$0.00 |
| | 6b. Taxes and Certain other debts you owe the government | 6b. | \$0.00 |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$0.00 |
| | 6e. Total. Add lines 6a through 6d. | 6e. | \$0.00 |
| | | | Total claim |
| Total claims from Part 2 | 6f. Student loans | 6f. | \$0.00 |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 |
| | Ol Daleta to manaism an unofit aborium ulama, and other | | \$ 0.00 |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | Φ |
| | | 6h. 6i. | \$ 23,661.00 |

| | | Caso 16 | 22002 Doc 1 | Filad 10/07/16 | Entor | ed 10/07/16 1 | 1:08:05 | Desc Main | |
|-------|-----------------------------------|----------------------|--|------------------------------|------------------------------|---|-----------------------------------|---------------------------------|-------|
| Fi | ll in this in | formation to iden | | | | 8 of 56 | | | |
| D | ebtor 1 | Emma | Jean | Dunn | - | | | | |
| D | ebtor 2 | First Name | Middle Name | Last Name | | | | | |
| | pouse, if filing) | First Name | Middle Name | Last Name | - | | | | |
| U | nited States | Bankruptcy Court for | r the : <u>NORTHERN</u> District of | | | | | | |
| | ase Number f known) | | | (State) | | | | Check if this in amended filing | |
| Off | icial Fo | orm 106G | | | | | | | |
| Scł | nedule | G: Execut | ory Contracts and | Unexpired Lea | ises | | | | 12/15 |
| nfor | mation. If n | nore space is nee | possible. If two married peopleded, copy the additional page | , fill it out, number the e | th are equal entries, and | ly responsible for sup attach it to this page. | plying correct On the top of a | ny | |
| addit | ional page: | s, write your nam | e and case number (if known) |) . | | | | | |
| 1. L | _ | - | contracts or unexpired leases submit this form to the court with | | ou have no | hing also to report on | this form | | |
| [| _ | | nation below even if the contract | | | | | | |
| _ | 100.1111 | | nadon bolow ovon il dio conda | | Concadio | 12. 7 ropony (emolai i | 01111 1007 1127 | | |
| | | | or company with whom you ha | | | | | | |
| | xample, re inexpired le | | cell phone). See the instructio | ns for this form in the inst | truction bool | det for more examples | of executory co | ntracts and | |
| | Person or | company with wh | nom you have the contract or | lease | | State what the c | ontract or lease | e is for | |
| 2.1 | 1 | | | | | | | | |
| | Name | | | | - | | | | |
| | Number | Street | | | _ | | | | |
| | Number | oucci | | | | | | | |
| | City | | State Zip | Code | | | | | |
| 2.2 | | | | | _ | | | | |
| | Name | | | | | | | | |
| | Number | Street | | | _ | | | | |
| | City | | State Zip |) Code | _ | | | | |
| 2.3 | | | · | | | | | | |
| | Name | | | | - | | | | |
| | Number | Street | | | _ | | | | |
| | Number | Sueer | | | | | | | |
| | City | | State Zip | Code | _ | | | | |
| 2.4 | | | | | | | | | |
| | Name | | | | _ | | | | |
| | Number | Street | | | _ | | | | |
| | | | | | _ | | | | |
| | City | | State Zip | Code | | | | | |
| 2.5 | | | | | _ | | | | |
| | Name | | | | _ | | | | |
| | Number | Street | | | | | | | |
| | | | | | | | | | |

State Zip Code

City

Official Form 106G

Case 16-32093 Doc 1 Filed 10/07/16 Entered 10/07/16 11:08:05 Desc Main

| Fill in this in | formation to iden | tify your case: | |
|---------------------|---------------------|---------------------------------------|-----------------|
| Debtor 1 | Emma | Jean | Dunn |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States | Bankruptcy Court fo | r the : <u>NORTHERN</u> District of _ | ILLINOIS(State) |
| Case Number | r | | _ |
| (If known) | | | |

Official Form 106H

Schedule H: Your Codebtors 12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| any Additional Pages, write your name and case number (if known). Answer every question. | | | | | | | | | | |
|---|--|---|-------------------------------|-----------------|--|--|--|--|--|--|
| Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) | | | | | | | | | | |
| | ■ No. □ Yes | | | | | | | | | |
| | 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Lousiiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) | | | | | | | | | |
| | No. Go to I | ine 3. | | | | | | | | |
| | Yes. Did yo | our spouse, former spouse, or | legal equivalent live with yo | ou at the time? | | | | | | |
| | _ | nwhich community state or ter | ritory did you live? | Fill | in the name and current address of that person. | | | | | |
| | Name of | your spouse, former spouse or legal equ | uivalent | , | | | | | | |
| | Number | Street | | | | | | | | |
| | City | | State | Zip Code | | | | | | |
| s | - | or Schedule G to fill out Colu | | | ficial Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the debt Check all schedules that apply: | | | | | |
| 3.1 | | | | | Schedule D, line | | | | | |
| | Name | | | | Schedule E/F, line | | | | | |
| | Number | Street | | | Schedule G, line | | | | | |
| | City | | State | Zip Code | | | | | | |
| 3.2 | | | | | Schedule D, line | | | | | |
| | Name | | | | Schedule E/F, line | | | | | |
| | Number | Street | | | Schedule G, line | | | | | |
| | City | | State | Zip Code | | | | | | |
| 3.3 | | | | | Schedule D, line | | | | | |
| | Name | | | | Schedule E/F, line | | | | | |
| | Number | Street | | | Schedule G, line | | | | | |
| | City | | State | Zip Code | | | | | | |

Official Form 106H Record # 711898 Schedule H: Your Codebtors Page 1 of 1

| | Case 16-32093 | Doc 1 | | Entered 10/07/16 11:0 | 08:05 Desc Main |
|---------------------------------|---|---|--|--|--|
| Fill in this | information to identify your | case: | | | |
| Debtor 1 | Emma First Name | Jean Middle Name | Dunn Last Name | _ | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | _ | |
| Case Numb (If known) | es Bankruptcy Court for the : <u>No</u> er | | | | led filing nent showing post-petition income as of the following date: |
| Schedu | le I: Your Incon | ne | | | 12/1 |
| upplying corr | ect information. If you are ma trated and your spouse is not | arried and not fili t filing with you, o | ng jointly, and your spouse do not include information a | tor 1 and Debtor 2), both are equally re is living with you, include information about your spouse. If more space is ne se number (if known). Answer every qu | about your spouse. eded, attach a |
| 1. Fill in yo informat | ur employment ion | | Debtor | 1 | Debtor 2 or non-filing spouse |
| • | ave more than one job, separate page with | Employment sta | Emp | ployed | Employed |

self-employed work. Occupation Disabled Occupation may Include student or homemaker, if it applies. **Employers name Employers address** How long employed there? Part 2: **Give Details About Monthly Income** Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary and commissions (before all payroll \$0.00 \$0.00 deductions). If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. \$0.00 \$0.00 Calculate gross income. Add line 2 + line 3. \$0.00 \$0.00

 Official Form 106I
 Record # 711898
 Schedule I: Your Income
 Page 1 of 2

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Debtor 1 Emma Jean Document Dunn Page 31 of 56 Case Number (if known) _____

| | | | | For Debtor 1 | For Debtor 2 or non-filing spouse | | |
|---|--------------|---|----------|-------------------------------|-----------------------------------|----------------|--|
| | Cop | y line 4 here | 4. | \$0.00 | \$0.00 | | |
| 5. I | List all | payroll deductions: | | | | | |
| | 5a. 1 | Fax, Medicare, and Social Security deductions | 5a. | \$0.00 | \$0.00 | | |
| | 5b. I | Mandatory contributions for retirement plans | 5b. | \$0.00 | \$0.00 | | |
| | 5c. \ | /oluntary contributions for retirement plans | 5c. | \$0.00 | \$0.00 | | |
| | 5d. F | Required repayments of retirement fund loans | 5d. | \$0.00 | \$0.00 | | |
| | 5e. I | nsurance | 5e. | \$0.00 | \$0.00 | | |
| | 5f. [| Domestic support obligations | 5f. | \$0.00 | \$0.00 | | |
| | 5g. l | Jnion dues | 5g. | \$0.00 | \$0.00 | | |
| | 5h. (| Other deductions. Specify: | 5h. | \$0.00 | \$0.00 | | |
| 6. A | dd the | e payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h. | 6. | \$0.00 | \$0.00 | | |
| 7. C | alcula | te total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$0.00 | \$0.00 | | |
| 8. L | ist all | other income regularly received: | _ | _ | | | |
| | 8a. | Net income from rental property and from operating a business, | | | | | |
| | | profession, or farm | | | | | |
| | | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | |
| | | monthly net income. | 8a. | \$0.00 | \$0.00 | | |
| | 8b. | Interest and dividends | 8b. | \$0.00 | \$0.00 | | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce | 8c. | \$ 0.00 | \$ 0.00 | | |
| | | settlement, and property settlement. | | | | | |
| | 8d. | Unemployment compensation | 8d. | \$0.00 | \$0.00 | | |
| | 8e. | Social Security | 8e. | \$1,081.00 | \$0.00 | | |
| | 8f. | Other government assistance that you regularly receive | - 8f. | · | \$0.00 | | |
| | OI. | Include cash assistance and the value (if known) of any non-cash | 01. | \$0.00 | Ψ0.00 | | |
| | | assistance that you receive, such as food stamps (benefits under the | | | | | |
| | | Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | | | | | |
| | 8g. | Pension or retirement income | 8g. | \$0.00 | \$0.00 | | |
| | 8h. | Other monthly income. Specify: | 8h. | \$0.00 | \$0.00 | | |
| 9. | Add | all other income . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. | 9. | \$1,081.00 | \$0.00 | | |
| 10. | | tulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | \$1,081.00 + | \$0.00 | \$1,081.00 | |
| 11. | State | e all other regular contributions to the expenses that you list in Schedule | a / | | | | |
| | | ide contributions from an unmarried partner, members of your household, you | | nts, your roommates, and | | | |
| | | r friends or relatives. | | | | | |
| | | ot include any amounts already included in lines 2-10 or amounts that are n cify: | | | | 11. \$0.00 | |
| 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. | | | | | | | |
| 40 | | e that amount on the Summary of Schedules and Statistical Summary of Ce | | ues and Related Data, if it a | applies | 12. \$1,081.00 | |
| 13. | x | ou expect an increase or decrease within the year after you file this form No. Yes. Explain: | 17 | | | | |
| | | | | | | | |

| Fill in this in | formation to identify you | r case: | | | | |
|---------------------|--|-----------------------|---|--|--------------------|----------------------|
| Debtor 1 | Emma First Name | Jean Middle Name | Dunn Last Name | Check if this is: | ed filina | |
| Debtor 2 | | | | | J | -petition chapter 13 |
| (Spouse, if filing) | First Name | Middle Name | Last Name | income as | of the following o | ate: |
| United States | Bankruptcy Court for the : | NORTHERN DISTRICT | OF ILLINOIS | | | |
| Case Number | r | | | MM / DD / ` | YYYY | |
| | orm 106 l | | | | - | 2 because Debtor 2 |
| Official F | <u>orm 106J</u> | | | maintains a | separate house | hold. |
| Schedul | e J: Your Exp | enses | | | | 12/14 |
| - | - | | | are equally responsible for supplyi ges, write your name and case num | _ | |
| Part 1: | Describe Your Household | | | | | |
| 1. Is this a joi | nt case? | | | | | |
| | Go to line 2. | | | | | |
| Yes. I | Does Debtor 2 live in a se | parate household? | | | | |
| | No. Yes. Debtor 2 must | file a separate Sched | ule J. | | | |
| 2. Do you h | nave dependents? | X No | | Dependent's relationship to | Dependent's | Does dependent live |
| | st Debtor 1 and | | ut this information for | Debtor 1 or Debtor 2 | age | with you? |
| Debtor 2 | | each depe | ndent | | | |
| Do not st | tate the dependents' | | | | | Yes |
| | | | | | | X No |
| | | | | | | Yes |
| | | | | | | |
| | | | | | | Yes |
| | | | | | | |
| | | | | | | Yes |
| | | | | | | |
| | | | | | | Yes |
| | expenses include s of people other than | X No | | | | |
| | and your dependents? | Yes | | | | |
| Part 2: | Estimate Your Ongoing Mon | thly Expenses | | | | |
| Estimate your | expenses as of your ban | kruptcy filing date u | nless you are using this form | n as a supplement in a Chapter 13 o | case to report | |
| the applicable | date. | - | | check the box at the top of the form | m and fill in | |
| | - | = | tance if you know the value r Income (Official Form 106I | .) | ` | our expenses |
| 4. The rent | tal or home ownership ex | penses for your res | dence. Include first mortgage | e payments and | | |
| any rent | for the ground or lot. | | | | 4. | \$400.00 |
| If not inc | cluded in line 4: | | | | | |
| 4a. Re | eal estate taxes | | | | 4a. | \$0.00 |
| 4b. Pro | operty, homeowner's, or re | enter's insurance | | | 4b. | \$0.00 |
| 4c. Ho | ome maintenance, repair, a | and upkeep expenses | 3 | | 4c. | \$0.00 |
| 4d. Ho | meowner's association or | condominium dues | | | 4d. | \$0.00 |
| | | | | | | |

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Debtor 1 Emma Jean

Middle Name

First Name

Document

Last Name

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Case Number (if known)

Your expenses \$0.00 5 Additional Mortgage payments for your residence, such as home equity loans 6. **Utilities:** \$130.00 6a. 6a. Electricity, heat, natural gas \$0.00 6b. Water, sewer, garbage collection \$50.00 Telephone, cell phone, internet, satellite, and cable service \$ 0.00 Other. Specify: 6d. \$300.00 7. 7. Food and housekeeping supplies \$0.00 8. 8. Childcare and children's education costs \$90.00 9. Clothing, laundry, and dry cleaning 10. \$35.00 Personal care products and services 10. \$20.00 11. Medical and dental expenses 11. \$0.00 **Transportation.** Include gas, maintenance, bus or train fare. 12. Do not include car payments. \$50.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 Charitable contributions and religious donations 14. 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. \$0.00 15a. 15a Life insurance \$0.00 15b. Health insurance 15b. \$0.00 15c. Vehicle insurance 15c. \$0.00 15d. 15d. Other insurance. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 16 17. Installment or lease payments: \$0.00 17a. 17a. Car payments for Vehicle 1 \$0.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. 17c. Other. Specify:_ \$0.00 17d. Other. Specify: 17d. 18. Your payments of alimony, maintenance, and support that you did not report as deducted \$0.00 from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. \$0.00 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. \$ 0.00 20b. Real estate taxes \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. 20d. Maintenance, repair, and upkeep expenses \$ 0.00 20e 20e. Homeowner's association or condominium dues

Official Form 106J Record # 711898

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Emma Jean Debtor 1 Case Number (if known) _ First Name Middle Name Last Name \$0.00 21. 21. Other. Specify: _ 22.. Your monthly expense: Add lines 4 through 21. \$1,075.00 22. The result is your monthly expenses. 23. Calculate your monthly net income. \$1,081.00 23a. 23a. Copy line 12 (your comibined monthly income) from Schedule I. \$1,075.00 23b. Copy your monthly expenses from line 22 above. 23b.-\$6.00 23c. Subtract your monthly expenses from your monthly income. 23c. The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? X No Explain Here: Yes.

Official Form 106J Record # 711898 Schedule J: Your Expenses Page 3 of 3

| Fill in this in | formation to iden | tify your case: | |
|---------------------------|----------------------|-----------------------------------|---------------------|
| Debtor 1 | Emma | Jean | Dunn |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States | Bankruptcy Court for | the : <u>NORTHERN</u> District of | ILLINOIS (State) |
| Case Number (If known) | - | | _ |

Official Form 106 Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below | |
|---|---|
| Did you pay or agree to pay someone who is NOT ar | n attorney to help you fill out bankruptcy forms? |
| ■ No | |
| Yes. Name of Person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | |
| | |
| | |
| Under penalty of perjury, I declare that I have read the correct. | ne summary and schedules filed with this declaration and that they are true and |
| | |
| 🗶 /s/ Emma Jean Dunn | x |
| Signature of Debtor 1 | Signature of Debtor 2 |
| Date 10/07/2016 | Date |
| MM / DD / YYYY | MM / DD / YYYY |
| | |

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Fill in this information to identify your case: Emma Dunn Debtor 1 Jean Middle Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the : <u>NORTHERN</u> District of <u>ILLINOIS</u> (State) Case Number Check if this is an (If known) amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct

| Give Details About Your Marital Status | s and Where You Lived Before | | | |
|--|--|-----------------------------------|---|---|
| 1. What is your current marital status? | | | | |
| Married | | | | |
| Not married | | | | |
| 2 During the last 3 years, have you lived anyw | here other than where you live | now? | | |
| No. | | | | |
| Yes. List all of the places you lived in the la | ast 3 years. Do not include wher | e you live now. | | |
| Debtor 1 | Dates Debtor 1 lived there | Debtor 2: | Debtor 2: | |
| property states and territories include Arizon and Wisconsin.) No. Yes. Make sure you fill out Schedule H: You state the Sources of Your Income Did you have any income from employment | our Codebtors (Official Form 106i | Н). | | |
| Fill in the total amount of income you received If you are filing a joint case and you have inco No. Yes. Fill in the details | from all jobs and all businesses | , including part-time activities. | | |
| If you are filing a joint case and you have inco No. | from all jobs and all businesses | , including part-time activities. | | |
| If you are filing a joint case and you have inco No. | I from all jobs and all businesses one that you receive together, list Debtor 1 Sources of income Check all that apply | , including part-time activities. | Debtor 2 Sources of income Check all that apply | Gross income (before deductions and exclusions) |

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| Debtor 1 | Emma | Jean | Dunn | Cas | se Number (if known) | |
|---------------|---|---|--|--|--------------------------------------|---|
| | First Name | Middle Name | Last Name | | , | |
| 05 D i | id you receive any oth | or income during this | year or the two previous ca | alandar vaare? | | |
| In ar | clude income regardles nd other public benefit p | ss of whether that incompayments; pensions; rer | ne is taxable. Examples of ontal income; interest; divider | ther income are alimony; child nds; money collected from law d together, list it only once un | suits; royalties; and gambling | |
| Lis | st each source and the | gross income from eac | h source separately. Do not | t include income that you liste | d in line 4. | |
| | No. Yes. Fill in the details | ; | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Describe below. | Gross income (before deductions and exclusions) | Sources of income Describe below. | Gross income (before deductions and exclusions) |
| | From January 1 of c | urrent year until | Social Security | \$1,081 per month | | |
| | the date you filed fo | r bankruptcy: | Disability | | | |
| | For last calendar ye | ar: | Social Security | \$13,000(est) | | |
| | (January 1 to Decen | ıber 31, 2015) | Disability | | | |
| | For last calendar ye | ar: | Social Security | \$13,000(est) | | |
| | (January 1 to Decen | nber 31, 2014) | Disability | | | |
| Part | :3: List Certain Pay | ments You Made Before | You Filed for Bankruptcy | | | |
| 06 A ı | re either Debtor 1's or | Debtor 2's debts prima | arily consumer debts? | | | |
| | "incurred by an | individual primarily for a | a personal, family, or housel | nsumer debts are defined in 1 nold purpose." y creditor a total of \$6,225* or | | |
| | ☐ No. Go to li | ine 7. | | | | |
| | total amour child suppo | nt you paid that creditor. ort and alimony. Also, do | Do not include payments for not include payments to an | 25* or more in one or more pa or domestic support obligation on attorney for this bankruptcy es filed on or after the date of | rs, such as case. | |
| | _ | · · | rimarily consumer debts. r bankruptcy, did you pay al | ny creditor a total of \$600 or n | nore? | |
| | No. Go to li | ne 7. | | | | |
| | creditor. Do | o not include payments t | | or more and the total amount ions, such as child support ar bankruptcy case. | | |
| | | | | | | |
| | | | Dates of payments | Total amount paid | Amount you still owe | Was this payment for |
| | | | | | | |

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| Debt | or 1 | EIIIIIa | Jean | Dulli | | Case Number (If known |) | |
|------|---------------------------|--|---|---|---|---|-----------------|---------------------------------|
| | | First Name | Middle Name | Last Name | | | | |
| 07 | Inside corporate age such | ders include your rela porations of which you nt, including one for a h as child support and No. | tives; any general partne lare an officer, director, p business you operate as lalimony. | rou make a payment on a ors; relatives of any general person in control, or owners a sole proprietor. 11 U.S. | partners; partnership of 20% or more of the | os of which you are a gen eir voting securities; and | any managing | |
| | Ц | Yes. List all payments | s to an insider. | Dates of payment | Total amount | Amount you still owe | Reason fo | r this payment |
| | | | | paymont | Para | | | |
| 08 | an ii Incli | nsider? | ts guaranteed or cosigne | ou make any payments or d by an insider. | transfer any property | on account of a debt that | t benefited | |
| | | | | Dates of | Total amount | Amount you still | | r this payment editor's name |
| | | | | payment | paid | owe | include cr | editor's name |
| | art 4 | Identify Legal ac | tions, Repossessions, and | d Foreclosures | | | | |
| 09 | List mod | all such matters, includifications, and contra | uding personal injury case ct disputes. | e you a party in any lawsuit es, small claims actions, di Nature of the case | vorces, collection sui | | ort or custody | Status of the case |
| | | Midland Funding Llo | : VS Emma Dunn | Collection | | unicipal District, Cook Cou | inty | Pending |
| | | | | Collection | | | | On appeal |
| | | | | | | | | |
| | | #13 M1 109985 | | | | | | Concluded |
| | | | | | | | | |
| | | | | | | | | |
| | | Cavalry Portfolio v. I | Emma J. Dunn | Contract | First Mu | unicipal District, Cook Cou | unty | Pending |
| | | Case #13 M1 13773 | 32 | | | | | On appeal |
| | | | | | | | | Concluded |
| | | | | | | | | |
| | | | | | | | | |
| 10 | Che | | ill in the details below. | any of your property repos | sessed, foreclosed, ç | garnished, attached, seize | d, or levied? | |
| 11 | | | ou filed for bankruptcy, on ment because you owed | did any creditor, including a debt? | g a bank or financial | institution, set off any a | mounts from y | your accounts |
| | | No. Go to line 11 | | | | | | |
| | | Yes. Fill in the information | ation below. | | | | | |
| 12 | | - | filed for bankruptcy, wa , a custodian, or anothe | s any of your property in r official? | the possession of a | n assignee for the benef | it of creditors | , a |
| | ■ N | No. Yes. | | | | | | |
| | | | | | | | | |
| | art 5 | List Certain Gifts | and Contributions | | | | | |
| 13 | With | hin 2 years before yo | u filed for bankruptcy, d | lid you give any gifts with | a total value of mor | e than \$600 per person? | | |
| | | No. | | | | | | |
| | | Yes. Fill in the details | for each gift. | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

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| Debtor | | Jean | Dunn | Case Number (if known) | 1 | |
|-------------|---|----------------------------|--|--------------------------------------|-------------------------|--------------------|
| | First Name | Middle Name | Last Name | | | |
| 14 V | Vithin 2 years before yoเ | ı filed for bankruptcy, di | id you give any gifts or contributions | with a total value of more than \$6 | 600 to any cha | arity? |
| | No. | | | | | |
| | Yes. Fill in the details t | for each gift. | | | | |
| | | | | | | |
| Par | List Certain Losse | 98 | | | | |
| | Vithin 1 year before you ambling? | filed for bankruptcy or s | since you filed for bankruptcy, did yo | u lose anything because of theft, | fire, other dis | aster, or |
| | No. | | | | | |
| | Yes. Fill in the details t | for each gift. | | | | |
| | | | | | | |
| Par | List Certain Paym | ents or Transfers | | | | |
| 16 y | Vithin 1 year before you | filed for bankruptcy, did | I you or anyone else acting on your b | pehalf pay or transfer any propert | y to anyone y | ou |
| | | | g a bankruptcy petition? rers, or credit counseling agencies fo | or services required in your bank | ruptcy. | |
| | No. | | | | | |
| | Yes. Fill in the details | | | | | |
| | Down Contact Info | | December and value of any nu | amounts transferred De | -to was mand | Amount of novement |
| | Party Contact Info | | Description and value of any pro- | | ate payment transfer | Amount of payment |
| | Geraci Law L.L.C. | | | | | \$1,000.00 |
| | 55 E. Monroe Street | #3400 | | | • | |
| | Chicago,IL 60603 | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 17 W | Vithin 1 year hefere you | filed for bankruptcy, did | I you or anyone else acting on your b | oohalf nav or transfor any proport | hy to anyono w | ho |
| | | | to make payments to your creditors | | y to arryone w | no . |
| D | o not include any paym | ent or transfer that you | listed on line 16. | | | |
| | No. | | | | | |
| | Yes. Fill in the details. | | | | | |
| 10 14 | Viste in O | . 6:1 - 1 6 - 1 1 1 1 | :d | | 41 | |
| | งเกเก 2 years before you ransferred in the ordinar | | id you sell, trade, or otherwise transf ess or financial affairs? | er any property to anyone, other t | tnan property | |
| | _ | | de as security (such as the granting | of a security interest or mortgage | on your prop | erty). |
| | _ | ransters that you have a | already listed on this statement. | | | |
| | No. | for a sub-size | | | | |
| L | Yes. Fill in the details t | for each gift. | | | | |
| | Vithin 10 years before yo | | did you transfer any property to a sel ction devices.) | f-settled trust or similar device of | f which you ar | re a |
| | No. | | | | | |
| [| Yes. Fill in the details t | for each gift. | | | | |
| | | | | | | |
| Par | List Certain Finan | cial Accounts, Instrumen | ts, Safe Deposit Boxes, and Storage Un | its | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

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| ebto | r1 <u>Emma</u> | Jean | Dunn | Case | Number (if known) | |
|------|---|---------------------------|--|--------------------------|-------------------------------------|-----------------------|
| | First Name | Middle Name | Last Name | | | |
| 20 | sold, moved, or transferred Include checking, savings, houses, pension funds, cod | ? money market, or oth | ere any financial accounts or ins ner financial accounts; certificate ns, and other financial institutio | es of deposit; shares in | | |
| | No. | | | | | |
| | Yes. Fill in the details. | Las | _ | Type of account or | Date account was | Last balance before |
| | | | | instrument | closed, sold, moved, or transferred | closing or transfer |
| 21 | Do you now have, or did yo cash, or other valuables? | u have within 1 year | before you filed for bankruptcy, | any safe deposit box o | or other depository for | securities, |
| | No. | | | | | |
| | Yes. Fill in the details. | | | | | |
| | | Who | o else had access to it? | Describe the conte | nts | Do you still have it? |
| 22 | Have you stored property in No. | n a storage unit or pla | ace other than your home within | 1 year before you filed | I for bankruptcy? | |
| | Yes. Fill in the details. | Who | o else has or had access to it? | Describe the conte | nts | Do you still have it? |
| | Identify Burney Ver | Hald an Cantual fan C | | | | nave it: |
| Lž | Identify Property Yo | u Hold or Control for S | omeone Eise | | | |
| 23 | for someone. | property that someo | ne else owns? Include any prope | erty you borrowed fron | n, are storing for, or ho | old in trust |
| | No. | | | | | |
| | Yes. Fill in the details. | Who | ere is the property? | Describe the prope | erty | Value |
| Pa | Give Details About E | invironmental Informat | tion | | | |
| or | the purpose of Part 10, the f | following definitions | apply: | | | |
| ı | hazardous or toxic substand | ces, wastes, or mater | ocal statute or regulation concer ial into the air, land, soil, surface cleanup of these substances, wa | water, groundwater, o | | |
| | Site means any location, fac it or used to own, operate, o | | efined under any environmental disposal sites. | law, whether you now | own, operate, or utiliz | e |
| | Hazardous material means a substance, hazardous mater | | nental law defines as a hazardous ninant, or similar term. | s waste, hazardous su | bstance, toxic | |
| Rep | oort all notices, releases, and | l proceedings that yo | ou know about, regardless of wh | en they occurred. | | |
| 24 | Has any governmental unit | notified you that you | may be liable or potentially liab | le under or in violation | of an environmental l | aw? |
| | No. | | | | | |
| | Yes. Fill in the details. | | | | | |
| | | Gov | vernmental unit | Environmental law | , if you know it | Date of notice |
| 25 | Have you notified any gove | rnmental unit of any | release of hazardous material? | | | |
| | No. Yes. Fill in the details. | | | | | |
| | | Gov | vernmental unit | Environmental law | , if you know it | Date of notice |
| 26 | Have you been a party in ar | ny judicial or adminis | trative proceeding under any en | vironmental law? Inclu | de settlements and or | ders. |
| | No. Yes. Fill in the details. | | | | | |
| | LI 165. I III III IIIe details. | Cou | ırt or agency | Nature of the case | | Status of the case |
| | | | • | | | |

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| | | | Document | Page 41 of 56 |
|----------|------|------|----------|------------------------|
| Debtor 1 | Emma | Jean | Dunn | Case Number (if known) |

Last Name

| Part | Give Details About Your Business | or Connections to Any Business |
|-------------|--|---|
| 27 y | ithin 4 years before you filed for bank | ruptcy, did you own a business or have any of the following connections to any business? |
| | A sole proprietor or self-employe | ed in a trade, profession, or other activity, either full-time or part-time |
| | A member of a limited liability co | mpany (LLC) or limited liability partnership (LLP) |
| | A partner in a partnership | |
| | An officer, director, or managing | executive of a corporation |
| | An owner of at least 5% of the vo | ting or equity securities of a corporation |
| ı | No. None of the above applies. Go to | Part 12. |
| | Yes. Check all that apply above and f | Ill in the details below for each business. |
| | lithin 2 years before you filed for bank istitutions, creditors, or other parties. | ruptcy, did you give a financial statement to anyone about your business? Include all financial |
| ı | No. | |
| [| Yes. Fill in the details. | |
| | | Date issued |
| Part | 12: Sign Below | |
| in 18 | connection with a bankruptcy case car U.S.C. §§ 152, 1341, 1519, and 3571. | d that making a false statement, concealing property, or obtaining money or property by fraud result in fines up to \$250,000, or imprisonment for up to 20 years, or both. |
| , | /s/ Emma Jean Dunn Signature of Debtor 1 | Signature of Debtor 2 |
| | digitative of Bestor 1 | digitation boston 2 |
| | Date 10/07/2016 | Date |
| | Date 10/07/2016 MM / DD / YYYY | MM / DD / YYYY |
| | you attach additional pages to <i>Your S</i> No Yes | Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? |
| Die | you pay or agree to pay someone wh | o is not an attorney to help you fill out bankruptcy forms? |
| | No | |
| | Yes. Name of person | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | | |

First Name

Middle Name

| Fill in this i | Caso 16.3 nformation to identify | | ilod 10/07/16 Ent | ored 10/07/16 11:08:05 2 of 56 | 5 Desc Main | |
|--|--|--|---|---|--|-------|
| Debtor 1 | Emma First Name | Jean Middle Name | Dunn Last Name | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| DIVISION | s Bankruptcy Court for the District of ILLINOIS | e : <u>NORTHERN DISTRICT OF</u> | (State) | | Check if this is an amended filing | |
| | | ion for Individua | ls Filing Under Ch | apter 7 | | 12/15 |
| you have leat You must file to whichever is e If two married Both debtors r Be as complet write your nam | this form with the cou earlier, unless the cou people are filing toge must sign and date th te and accurate as poon ne and case number (List Your Creditors Wi editors that you listed | ty and the lease has not expi urt within 30 days after you fi urt extends the time for cause ether in a joint case, both are ne form. ssible. If more space is need | le your bankruptcy petition or l e. You must also send copies to equally responsible for supply | by the date set for the meeting of cree to the creditors and lessors you list. Fing correct information. This form. On the top of any additional | | |
| | | | editors Who Have Claims Secu | red by Property (Official Form 106D), | fill in the | |
| | | | | red by Property (Official Form 106D), to do with the property that | fill in the Did you claim the property as exempt on Schedule C? | |
| Creditor's name: Description property securing | on of | in Part 1 of Schedule D: Cre | What do you intend secures a debt? Surrender t Retain the p Reaffirmation | to do with the property that | Did you claim the property | |

☐ No Creditor's ☐ Surrender the property name: Retain the property and redeem it Yes Retain the property and enter into a Description of Reaffirmation Agreement. property securing debt: Retain the property and [explain]: _ □No Creditor's ☐ Surrender the property name: Retain the property and redeem it Yes Retain the property and enter into a Description of Reaffirmation Agreement. property securing debt: Retain the property and [explain]: Page 1 of 2 Official Form 108 Record # 711898 Statement of Intention for Individuals Filing Under Chapter 7

Debtor 1

Emma

Case 16-32093

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First Name

| fill in the information below. Do not list real estate le | eases. Unexpired leases are leases that are still in effect; the lease if the trustee does not assume it. 11 U.S.C. § 365(p | ease period has not yet |
|--|---|----------------------------|
| Describe your unexpired personal property leas | ses | Will the lease be assumed? |
| Lessor's name: | | □ No |
| Description of leased property: | | ☐ Yes |
| Lessor's name: | | □ No |
| Description of leased property: | | ☐ Yes |
| Lessor's name: | | □No |
| Description of leased property: | | Yes |
| Lessor's name: | | □No |
| Description of leased property: | | □Yes |
| Lessor's name: | | □No |
| Description of leased property: | | □Yes |
| Lessor's name: | | □No |
| Description of leased property: | | □Yes |
| Lessor's name: | | □No |
| Description of leased property: | | Yes |
| Part 3: Sign Below | | |
| Under penalty of perjury, I declare that I have indicat personal property that is subject to an unexpired lea | ted my intention about any property of my estate that secures asse. | a debt and any |
| /s/ Emma Jean Dunn Signature of Debtor 1 | Signature of Debtor 2 | |
| Date Dated: 10/07/2016 | Date | |

MM / DD / YYYY

MM / DD / YYYY

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court

| | | NORTHERN L | DISTRICT OF ILLINOIS EASTERN DIVIS | SION | |
|------|---------------------------|---|--|---|--------------------------|
| In r | re | | | | |
| Em | ıma Jean Dı | unn / Debtor | Case No | o: | |
| | | | Chapter | : Chapter 7 | |
| | | DISCLOSURE OF | F COMPENSATION OF ATTORNEY FOR D | EBTOR | |
| | npensation p | o 11 U.S.C. § 329(a) and Fed. Bankr. P. 2 baid to me within one year before the filin | 2016(b), I certify that I am the attorney for the about of the petition in bankruptcy, or agreed to be prontemplation of or in connection with the bankruptcy. | pove named debtor(paid to me, for servi | ices |
| | For legal | services, I have agreed to accept | \$1,895.00 | | |
| | Prior to th | ne filing of this statement I have received | \$1,000.00 | | |
| | Balance I | Due | \$895.00 | | |
| 2. | The source | e of the compensation paid to me was: | | | |
| | Deb | otor(s) Other: (specify | | | |
| 3. | The source | e of compensation to be paid to me is: | | | |
| | De | btor(s) Other: (specify | | | |
| 4. | | | compensation with any other person unless they | are members and a | associates |
| | | y law firm. A copy of the agreement, togo | mpensation with a other person or persons who as ether with a list of the names of the people sharing | | |
| 5. | In return for case, inclu | | to render legal service for all aspects of the bank | kruptcy | |
| | a. Analy | ysis of the debtor's financial situation, and | d rendering advice to the debtor in determining v | whether to file a per | tition in |
| | bankr | ruptcy; | | | |
| | b. Prepa | aration and filing of any petition, schedule | es, statements of affairs and plan which may be r | required; | |
| | c. Repre | esentation of the debtor at the meeting of | creditors and confirmation hearing, and any adjo | ourned hearings the | reof; |
| | d. Repre | esentation of the debtor in adversary process | eedings and other contested bankruptcy matters; | | |
| | e. [Othe | er provisions as needed] | | | |
| 6. | By agreem | nent with the debtor(s), the above-disclose | ed fee does not include the following service: | | |
| | Fee does | NOT include missed meeting or co | ourt dates, amendments to schedules, advers | | r conversions to another |
| cha | pter, judicia | l lien avoidances, dischargeability actions | s, other contested matters except the first meeting | g of creditors. | _ |
| | | Leartify that the foregoing is a com | CERTIFICATION uplete statement of any agreement or arrangemen | t for | |
| | | payment to | iplete statement of any agreement of arrangemen | 11 101 | |
| | | me for representation of the debtor(s) in | 1 1 1 | | |
| | | Date: 10/07/2016 | /s/ David Kosk Signature of Attorney | | |
| | | Date | Signature of Attorney | | |

Page 1 of 1 711898 Record #

Geraci Law L.L.C. Name of law firm

Casatib Gais Republicante Bos et. Molinide Strate 1,48761 Gnica En 10/12/3/12 68601: Nep 05 eracha Scom Main

Date: 6/10/2016

Consultation Attorney: AND 45 of 56

Record #: 711-898



Chapter 7 Retainer Agreement

The undersigned hires Geraci Law L.L.C. and its associated attorneys for representation in a Chapter7 bankruptcy under the following terms and conditions:

Attorney fees for the Chapter 7 bankruptcy are \$ This amount does NOT INCLUDE court filing fees of \$335, or costs for credit counseling or financial management classes. This fee is based on the anticipated amount of work required to complete my case, and upon the information I have provided to date. If any information is incomplete or incorrect, the advice or Chapter may have to change, and this fee may have to be adjusted. This fee includes all work in the representation of my normal Chapter7, including preparation of my bankruptcy petition, schedules and other documents, first341 meeting, reaffirmations, normal correspondence with my creditors and myself, but does NOT include excessive work caused by you, missed341 meetings, reopening the case, amendments to schedules, work on audits or asset cases, objections to exemptions, conversion to another chapter, evidentiary hearings, other contested matters or motions, or adversary proceedings, because these cannot be predicted in setting a flat fee. For work done on these matters, we bill between \$275/hr and \$450/hr for attorney time, based on the attorney doing the work, and \$85 to \$125/hr paralegal time. I agree that more than one attorney and paralegal will work on my case.

Fees are "flat fees" and "advance payment retainers" for pre-filing work, become property of this firm on payment, and are deposited into the firm's operating account. Payments are applied to the "flat fee". You may elect to be billed on an hourly basis, but we have found a flat fee is cheaper and benefits you. If this contract is terminated by either party prior to the filing of the case, the firm will refund unearned fees based on the above rates with an accounting, and on request, submit any dispute to binding arbitration within30 days. If I close my file or breach this contract I agree to pay for the work done to that time. I assign to my attorney all amounts tendered as filing fees or court costs and authorize my attorney to transfer said funds from his trust account to his operating account in payment of all outstanding fees owed by me if case is not filed.

I understand that bankruptcy laws only allow me to protect a certain amount of my property, and if I have any unprotected property, I understand my Chapter 7 Trustee can sell it if I do not or cannot buy out the Trustee's interest and that the U.S. Trustee may object to my filing a Chapter 7 if they believe I have excess income and should be filing a Chapter 13.

I agree to fully cooperate with my attorneys and provide all information requested at any point during the case. I understand that if I do not fully cooperate or provide complete and accurate information, my attorneys may withdraw from representation of me, with the permission of the Court.

If I have secured debts that I wish to retain (mortgages, financed vehicles or other financed property) that I may be required to sign a reaffirmation agreement with the creditor in order to keep the property, and I must remain current on my payments. Many mortgage and car companies refuse to reaffirm the debt but we have found that if you keep up your payments you keep the property anyway.

Debts not discharged if they not paid in full: student loans; educational debts & tuition; most tax debts: unfiled, trust fund or late filed tax; undisclosed debts; support/maintenance debts; fines, debts incurred by fraud, or after the case is filed, future condo/HOA dues,or debts listed in your red or green folder as usually not discharged, or found non-dischargeable by a Judge.

Representation limited to Bankruptcy Court We don't represent you in state court, or loan modifications or similar matters.

I cannot transfer any property or incur any credit or debt without the express permission of my attorney or the Court and I must make full disclosure of all income, expenses, debts and assets in my initial consultation and on my bankruptcy petition.

I understand that if I fail to take my financial management class after filing but before discharge, my case may be closed without a discharge, and I will be required to pay fees and costs to have it reopened. I have received the 11U.S.C § 527(a) disclosures.

Dated: Emma Dunn(Debtor) (Joint Debtor)

Attorney for the Debtor(s), Representing Geraci Law L.L.C. rev 150511

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

Emma Jean Dunn / Debtor

Bankruptcy Docket #:

Judge:

VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 10/07/2016 /s/ Emma Jean Dunn

Emma Jean Dunn

X Date & Sign

Record # 711898 B 1D (Official Form 1, Exh.D)(12/08) Page 1 of 1

^{*} Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

B 201A (Form 201A) (11/11)

UNITED STATES BANKRUPTCY COURT

NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a joint case (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are

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Form B 201A, Notice to Consumer Debtor(s)

In re Emma

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found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

| Dated: 10/07/2016 | 75/ Ellilla Jean Dulli | |
|-------------------|------------------------|--|
| | Emma Jean Dunn | |
| Dated: 10/07/2016 | /s/ David Kosk | |
| | Attorney: David Kosk | |

Icl Emma Joan Dunn

Form B 201A. Notice to Consumer Debtor(s) Record # 711898 Page 2 of 2

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| Debto | _{r 1} Emma | Jean | Dunn | Case Number (if kno | own) |
|--|---|------------------------------|------------------------------|--|---------------------------------|
| | First Name | Middle Name | Last Name | | |
| | | | | | |
| Par | 16: Answer These Question | ns for Reporting Purposes | ı | | |
| 16. | What kind of debts do | • | • | r debts? Consumer debts are define | |
| | you have? | No. Go to | line 16b. | a personal, raining, or riouseriold purp | |
| | • | Yes. Go to | | | |
| | | | | debts? Business debts are debts the prough the operation of the business of | |
| | | No. Go to ☐Yes. Go t | | | |
| | | 16c. State the type | of debts you owe that are | not consumer debts or business debt | s. |
| | | | | | |
| 17. | Are you filing under Chapter 7? | ☐No. I am not | filing under Chapter 7. Go | o to line 18. | |
| | Do you estimate that after | | | u estimate that after any exempt prop hat funds will be available to distribute | |
| | any exempt property is excluded and | No. | | | |
| | administrative expenses are paid that funds will be | Yes. | * | • | |
| : | available for distribution to unsecured creditors? | | • | , | |
| 18. | How many creditors do | 1 -49 | | 1,000-5,000 | <u>25,001-50,000</u> |
| | you estimate that you | □ 50-99 | | 5,001-10,000 | ☐ 50,001-100,000 |
| | owe? | ☐ 100-199 ☐ 200-999 | | 10,001-25,000 | ☐ More than 100,000 |
| 19. | How much do you | \$0-\$50,000 | | \$1,000,001-\$10 million | □\$500,000,001-\$1 billion |
| accading to the control of the contr | estimate your assets to | ☐ \$50,001-\$100 | | \$10,000,001-\$50 million | \$1,000,000,001-\$10 billion |
| | be worth? | □ \$100,001-\$50 | | \$50,000,001-\$100 million | \$10,000,000,001-\$50 billion |
| | | □ \$500,001-\$1 r | nillion 🔲 S | \$100,000,001-\$500 million | ☐More than \$50 billion |
| 20. | How much do you | \$0-\$50,000 | - 🗆 : | \$1,000,001-\$10 million | □\$500,000,001-\$1 billion |
| | estimate your liabilities | \$50,001-\$100 | ,000 | \$10,000,001-\$50 million | ☐ \$1,000,000,001-\$10 billion |
| | to be? | 1 \$100,001-\$50 | 0,000 🔲 5 | \$50,000,001-\$100 million | □ \$10,000,000,001-\$50 billion |
| | • | □ \$500,001-\$1 r | nillion 🔲 🤉 | \$100,000,001-\$500 million | ☐ More than \$50 billion |
| Par | rt 7: Sign Below | | | | |
| For | you | I have examined thi correct. | s petition, and I declare un | der penalty of perjury that the informa | ation provided is true and |
| energy and the second control of the second | | | | aware that I may proceed, if eligible, u ne relief available under each chapter | |
| - | • | | | or agree to pay someone who is not a notice required by 11 U.S.C. § 342(b). | an attorney to help me fill out |
| ania ania ania ania ania ania ania ania | | I request relief in ac | cordance with the chapter | of title 11, United States Code, speci | fied in this petition. |
| | ** ** | with a bankruptcy c | | aling property, or obtaining money or o \$250,000, or imprisonment for up to | |
| - | | a | | | |
| ************************************** | | * A mm | la Dunn | × | |
| *************************************** | | Signature of D | Pebtor 1 | | e of Debtor 2 |
| CANADAC CANADA | | Executed on _ | :10 / 7 /2016 | Executed | on |

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| or 1 | Emma | Jean | Dunn | | |
|--------------------|------------|----------------------------------|-------------------------------|---|--|
| | First Name | Middle Name | Last Name | - | |
| or 2 | | | | _ | |
| e, if filing) | First Name | Middle Name | Last Name | | |
| d States Number | | the : <u>NORTHERN</u> District o | of <u>ILLINOIS</u> (State) | | |

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below | |
|---|---|
| Did you pay or agree to pay someone who is NOT an attorney to | out bankruptcy forms? |
| No | |
| Yes. Name of Person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | |
| | |
| | |
| Under penalty of perjury, I declare that I have read the summary a correct. | es filed with this declaration and that they are true and |
| * Emma Duna | |
| Signature of Debtor 1 | of Debtor 2 |
| Date : 10 / 7 /2016 MM / DD / YYYY | M / DD / YYYY |
| | |

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Dunn

Case Number (if known) ____

| ebtor 1 | Emma | Jean | Dunn | |
|-------------------------|--|--|---|---|
| | First Name | Middle Name | Last Name | |
| e0000004(*****)\$000000 | | | | |
| | | | | |
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| | | | | |
| | | | | |
| 25 Ha | ve you notified any (| governmental unit of any re | elease of hazardous material? | |
| = | No. | | | |
| | | la. | | |
| L | Yes. Fill in the detail | 000000000000000000000000000000000000000 | ernmental unit | Environmental law, if you know it Date of notice. |
| | | Gove | ermitental unit | |
| | | ! ivdicial or administ | rative proceeding under any enviro | nmental law? Include settlements and orders. |
| 26 H a | ive you been a party | in any judicial of administ | , alive proceeding arrest engine | |
| | No. | | | |
| F | Yes. Fill in the detai | ls. | | |
| <u> </u> | 1 100.7 11 11 11 0 0000 | -x-cohelecte x 1011 | nt or agency | Nature of the case Status of the case |
| | | | 4 | |
| | | 20000000 | | × 19/10/2007 |
| Part ' | Give Details Ab | out Your Business or Conne | ections to Any Business | |
| 27 12 | ithin 4 years hefore | ou filed for bankruntov di | id vou own a business or have anv | of the following connections to any business? |
| Z. W | | | | |
| | | | ade, profession, or other activity, ei | |
| | A member of a | limited liability company (l | LLC) or limited liability partnership | (LLP) |
| | A partner in a p | artnership | | |
| | _ | ctor, or managing executiv | ve of a corporation | |
| | | | | |
| | ∐An owner of at | least 5% of the voting or e | quity securities of a corporation | · · |
| | | | | |
| | . | U 0 1- 0-440 | | |
| | | ove applies. Go to Part 12. | | |
| 28 W | Yes. Check all that | apply above and fill in the d | details below for each business. | o anyone about your business? Include all financial |
| in | Yes. Check all that | apply above and fill in the d you filed for bankruptcy, d or other parties. | details below for each business. | o anyone about your business? Include all financial |
| in | Yes. Check all that lithin 2 years before astitutions, creditors, | apply above and fill in the d you filed for bankruptcy, d or other parties. | details below for each business. | o anyone about your business? Include all financial |
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Record # 711898

Emma_

| otor 1 🕒 | Document Page 5 | 52 of 56 Case Number (if known) |
|--------------------|---|--|
| _ | First Name Middle Name Last Name | |
| Part 2: | List Your Unexpired Personal Property Leases | |
| in the in | nexpired personal property lease that you listed in <i>Schedule G: Executory Contracts ar</i> information below. Do not list real estate leases. <i>Unexpired leases</i> are leases that are st unay assume an unexpired personal property lease if the trustee does not assume it. | till in effect; the lease period has not yet 11 U.S.C. § 365(p)(2). |
| | be your unexpired personal property leases 's name: | Will the lease be assumed? ☐ No |
| Descrip propert | ption of leased ty: | Yes |
| Lessor | 's name: | No |
| Descrip propert | ption of leased ty: | ☐ Yes |
| Lessor | 's name: | □ No |
| Descrip propert | ption of leased ty: | □Yes |
| Lessor | 's name: | |
| Descrip propert | ption of leased ty: | □Yes |
| Lessor | 's name: | □No |
| Descrip propert | ption of leased ty: | □Yes |
| Lessor | 's name: | ·□No |
| Descrip propert | ption of leased ty: | ☐Yes |
| Lessor | 's name: | □No |
| Descrip propert | ption of leased ty: | Yes |
| | Sign Below | |

Signature of Debtor 2

Dated: 10 / 7 /2016 MM / DD / YYYY

Date MM / DD / YYYY

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DISCLAIMER UDEBtors have read and agree:

- 1. Divorce or family support debts to a spouse, ex-spouse, child, guardian ad litem or similar person or entity in connection with a separation agreement, divorce decree or court order are not dischargable. Priority support debts must be paid in full in your Chapter 13 or it cannot be confirmed. DEBTS YOU AGREED TO ASSUME IN MARITAL SETTLEMENT AGREEMENTS are NON-DISCHARGEABLE if your ex-spouse files an adversary complaint, and the Judge rules that (a) you do not have the ability to pay the debt OR (b) discharging such debt would result in a benefit to you that outweighs the detriment to ex-spouse or your child. You agree to get advice in writing from your divorce attorney and send to us with copy of agreement. You must list any ex-spouse or spouse as a creditor. No guarantee any divorce debt is dischargeable. Property you are still on title to, or have a right to in a divorce, may be taken by a Bankruptcy trustee in a Chapter 7 and sold, or may be disposable income in a 13.
- 2. Student loans and educational benefits are not discharged in Chapter 7 or 13 if government insured loan or owed to non-profit school unless you pay us to file a complaint within the bankruptcy to prove repayment would be an "undue hardship", and win. Interest on student loans continue to run while you are in a Chapter 13.
- 3. Cosigners, joint applicants, debts of persons other than debtor, debts incurred during marriage in community property states, or for family support are not discharged and joint, community or co-signers are not protected from collection unless you pay 100% of the debt. Creditors can collect from co-signors and put your bankruptcy on their credit report, and report them negatively to credit bureaus. You may prevent this by making the regular payments to the creditor. Creditors can liquidate collateral of your co-signer and refuse to continue payment in installments. Property you are joint on with other persons can be LIQUIDATED to pay your creditors.
- 4. TAX DEBTS. Most taxes are not discharged in bankruptcy. However, income tax debt (1040 type tax) can be discharged if the following four rules are met:

 (1). The tax return was DUE at least 3 YEARS (plus extensions) before the filing of your bankruptcy case. (2). You FILED your income tax return at least 2 YEARS before your bankruptcy was filed. (You did not file a return if the tax authority or IRS had to file one for you, or if you didn't send the return to the District Director) (3). You did not wilfully intend to evade the tax. (4). The tax must have been ASSESSED over 240 DAYS before the bankruptcy filing. We recommend you meet with the IRS or state department of revenue to make sure all the conditions have been met, before you hire us or file a bankruptcy. Fraudulent taxes and taxes on unfiled returns can be discharged in a Chapter 13 case. Time in an offers in compromise, & time in bankruptcy plus 6 months, will extend the above time periods. Employers' share of FICA & FUTA is dischargeable, but not trust fund taxes like the employee's funds or sales tax.
- 5. Fines, traffic tickets, parking tickets, penalties to governmental unit are not discharged in Chapter 7, may not be discharged in 13 without full payment.
- 6. Non filing spouse: If you file individually, your spouse is not our client. Only your debts are discharged. If you want to protect a non-filing spouse, pay their bills or file a joint case with them. Family expenses (medical bills, rent and necessities may be collected from a non-filing spouse). Wisconsin, community property is liable for community debts. 7. DUI PERSONAL INJURIES, DEBTS YOU DON'T LIST are not discharged.
- 8. DEBTS where creditors successfully object to discharge may survive Creditors, the Trustee, or Court, can try to deny discharge based on many factors,
- a. Income sufficient to pay a percentage of your unsecured debt. b. Failure to keep books and records documenting your financial affairs. c. Luxury purchases or cash advances within 60 days of filing or without intent or ability to repay. d. Debts you made by false pretenses, breach of fiduciary duty, wilful and malicious injuries to others e. Benefit overpayments like aid or unemployment if a determination of fraud has been made before or during bankruptcy. f. Failure to appear at meetings, court dates, or co-operate with the Trustee.
- 9. INTEREST ON NON-DISCHARGEABLE DEBTS in a Chapter 13 continues to accrue, and CREDITORS WHO DO NOT FILE CLAIMS in your Chapter 13 plan within 90 days (180 days for governmental units) of the meeting of creditors, do not get paid. Your plan and their claim should provide for interest at contract rate, or you will have to pay the debt outside the Chapter 13 plan. Property taxes must be paid by you directly to avoid sale for delinquent taxes.
- 10. LIQUIDATION OF REAL AND PERSONAL PROPERTY. If you file a Chapter 7, any property that is not listed and claimed exempt on Schedule C pursuant to state or federal law is taken and sold by the trustee to pay creditors. You agree to assume the risk that your property will be taken and sold by the bankruptcy trustee (at or less than what it is worth) if we can't protect it under applicable state law. You get a discharge, but the trustee can take property not listed and exempted on schedules B and C and sell it for whatever price will provide some benefit to creditors.
- 11. CHANGE IN LAWS. Laws & court cases change constantly. We can file your case today if you pay us in full (some attorneys give credit, we don't) pay the filing fee and sign your petition in our main office. ANY DELAY either in hiring us, or after, IS YOUR REPSONSIBILITY. ADVERSE RULINGS Judges that sit in adjoining courtrooms can rule differently on the same facts. We can predict but can't guarantee a judge will or will not rule against you. You accept the risk of a judge ruling against you, as in any lawsuit.
- 12. PAYMENTS TO CREDITORS YOU PREFERRED to pay more than \$600 in front of others, within 1 yr if a relative or insider, or within 90 days if another creditor, so don't pay off debts to keep credit cards or protect others. TRANSFERS OF PROPERTY within 4 years that made you unable to pay your debts at the time can be reversed by a Trustee and the transferee will have to give back the property you transferred.
- 13. SURRENDER OF PROPERTY Bankruptcy gets rid of debts, but real estate, condos and time shares remain in your name until a foreclosure sale or the lender accepts a deed in lieu of foreclosure. Turn condo keys over to condo association or remain liable for assessments after filling, and make sure you keep buildings & land insured and maintained and secured until it is taken back by lender or out of your name. If you let a house go vacant and pipes explode or someone gets killed in there you may be liable.
- 14. RIGHT TO RECEIVE inheritances, tax refunds, injury claims, compensation of any kind, insurance or realty commissions, are property of the bankruptcy estate and you will surrender these to the trustee unless they are claimed exempt on Schedule C, and no objection to your claim of exemption is upheld. Do not deduct extra money from taxes so you are entitled to a refund, change your W-9 if necessary.
- 15. JOINT ACCOUNT HOLDERS holders entire amount in the account could be taken by the trustee under Chapter 7.
- 16. MARRIED COUPLES GOING THROUGH DIVORCE: We have been advised to seek independent counsel for our bankruptcy. We understand that Peter Francis Geraci does not represent us with regard to any divorce matters and does not make any representations regarding what will happen in divorce court. We have decided to file a bankruptcy together dispite the fact that we are getting a divorce and our interests could be adverse. We have agreed to cooperate with each other in this joint bankruptcy.
- 17. AUTO LEASES & INSTALLMENT AGREEMENTS to purchase things, leases and almost all contracts will be void after bankruptcy. They are "executory contracts", and if they are of no benefit to the bankruptcy estate and not assumed within 60 days of filing, they are void. Debtors have been warned of this, and unless there is a novation under state law, or agreement not to use bankrptcy to void the contract, the debtors rights under the contract are extinguished. Debtor agrees to be responsible for obtaining such agreements or losing rights under such contracts. Debtor agrees that his or her attorney will not file motions to assume such contracts.
- 18. Setoffs if you have money in a credit union or creditor account, or other loans that cross-collateralized, any money or property may be taken for both loans. The Undersigned have read the above & assume the risk that a debt is not discharged in bankruptcy, that our non-exempt property will be taken and sold by the bankruptcy trustee if it can't be protected, that the trustee might object if I/we have excess income, or change in State, Federal or Bankruptcy laws before the case is filed in Court AND WE HAVE TO READ, CHECK, & MAKE SURE OUR PETITION IS ACCURATE!!!!

| Dated: /// //////2016 | 6 mmaDunn | X Date & Sign |
|-----------------------|----------------|---------------|
| | Emma Jean Dunn | |

Record # 711898

Case 16-32093 Doc 1 Filed 10/07/16 Entered 10/07/16 11:08:05 Desc Main Document Page 54 of 56

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

Emma Jean Dunn / Debtor

Bankruptcy Docket #:

Judge:

VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 10 1 7 /2016

Emma Dunn

Emma Jean Dunn

X Date & Sign

^{*} Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

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| De | btor 1 | Emma | Jean | Dunn | _ | Case Number (if known) | | |
|--|-----------------|---|---|---|------------------------|---------------------------|--|----------------------|
| } | | First Name | Middle Name | Last Name | _ | , , | | |
| | | | | | | Column A Debtor 1 | Column B Debtor 2 or non-filing spouse | SECONDARY CONTRACTOR |
| 8. | Unem | ployment compe | ensation | • | | \$0.00 | \$0.00 | |
| | Do not under | enter the amour the Social Secur | nt if you contend that the amount r ity Act. Instead, list it here: | eceived was a benefit | | | | |
| | For yo | ou | | | | | ٠ | |
| ************************************** | For yo | our spouse | | | | | | |
| 9. | | on or retirement t under the Socia | t income. Do not include any amo al Security Act. | unt received that was a | | \$0.00 | \$0.00 | , |
| 10 | Do no as a v | t include any ber ictim of a war cri | sources not listed above. Specifinefits received under the Social Seme, a crime against humanity, or it, list other sources on a separate | ecurity Act or payments international or domesti | received c | | | |
| | | | | • | | \$0.00 | \$ 0.00 | |
| | 10b. | | | | | \$ 0.00 | \$0.00 | |
| | 10c. To | | m separate pages, if any. | | | \$0.00 | \$0.00 | ŧ |
| 11. | Calcu colum | late your total con. Then add the | urrent monthly income. Add lines total for Column A to the total for C | 2 through 10 for each | i. | \$0.00 + | \$0.00 = | \$0.00 |
| | | | | | | | | |
| | | | | | | | | |
| P | art 2: | Determine V | Whether the Means Test Applies to | You | | | | |
| | | - | t monthly income for the year. Fo | • | | | · · · · · · · · · · · · · · · · · · · | |
| | | | current monthly income from line 1 | 1 | | Copy line 11 here | 12a. į | \$0.00 |
| | | | ne number of months in a year). | | | | g | x 12 |
| | 12b. | The result is you | r annual income for this part of the | of form. | | | 12b. | \$0.00 |
| 13. | Calcu | ate the median | family income that applies to you | J. Follow these steps: | | | | |
| | Fill in t | he state in which | n you live. | <u> </u> | L | | | |
| | Fill in t | he number of pe | ople in your household. | | 1 | | | |
| | To find | a list of applicat | y income for your state and size of ole median income amounts, go on n. This list may also be available a | nline using the link spec | cified in the separate | | 13. | \$49,741.00 |
| 14. | How d | o the lines com | pare? | | | | | |
| | 14a. [| x line 12b is less Go to Part 3. | s than or equal to line 13. On the t | op of page 1, check box | x 1, There is no presi | umption of abuse. | | |
| | 14b. [| | re than line 13. On the top of page nd fill out Form 122A-2. | 1, check box 2, The p | resumption of abuse | is determined by Form 12 | 22A-2. | |
| Ρ | art 3: | Sign Below | · | | | | | |
| | I | By signing here, | I declare under penalty of perjury | that the information on | this statement and in | any attachments is true a | nd correct. | |
| | | | Emma Jean Dunn | | | | | |
| | | Date:: <u>10</u> | / / /2016 | | | | • | |
| | ı | f you checked lir | ne 14a, do NOT fill out or file Form | ı 122A-2. | | | | |
| | 1 | f you checked lir | ne 14b, fill out Form 122A-2 and fil | e it with this form. | | | | |

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Form B 201A, Notice to Consumer Debtor(s)

In re Emma Jean Dunn / Debtor

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found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filling fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

Dated: 10 / 7 /2016

Emma Jean Dunn

X Date & Sign

Dated: 10/ 7 /2016

Attorney: David Kosk